The Impact of Intensive Counseling and Mentoring On African American Male Adolescents at New Life Counseling and Mental Health Services

By

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ABSTRACT

As an African American Licensed Clinical Social Worker for over 30 years, I know that youth of different backgrounds and ethnicities do not experience trauma equally. Nationally, 61 percent of Black children have suffered at least one adverse experience, compared with 40 percent of White children (Williams and Williams, 2000). This impact is felt most amongst Black male adolescents in their behavior, emotional development, and educational outcomes. This project will use New Life Counseling and Mental Health, as its site to design a restorative mentoring/counseling approach to address the distress that Black male youth experience.

New Life Counseling and Mental Health LLC., is a caring and comprehensive mental health private practice. Our approach is holistic and creative in helping our clients to achieve their fullest potential. We recognize the need to address the whole person as a mental, physical, and spiritual being. Based on a need's assessment, we utilize a combination of treatment modalities. Our focus is to assist you in reaching your treatment goals effectively and efficiently within a supportive, caring, and non-judgmental therapeutic environment. We are respectful, sensitive, and aware of cultural, racial, and gender differences; and promote this awareness through our counseling principles**.** While our primary mode of engagement is cognitive behavioral therapy our goal is to improve the lives of those we encounter.

DEDICATION

To James Boyd, my second-year roommate at the University of Virginia. I learned a lot from you in your short, determined life. JB, you left an impact on me and are not forgotten. I hope that your spirit is at rest and content with the person that I have become.

ACKNOWLEDGEMENTS

I have received a lot of help along the way. My partner, Kevin Clark, has shown patience as I persevered. Joanne Williams, my sister has nursed me back to health and life numerous times throughout this process. My niece, Jameelah Virgil, provided technical assistance and started graduate school as I intended. My brother, Rev. Dr. Stephen Webb, was the first to encourage me to consider this doctoral program. Reverend Brenda Brown Grooms has been my spiritual advisor. The foundation my parents - Alice and Leslie Webb, laid in place so many years ago, has remained intact.

PREFACE

This paper represents two complementary paths that have emerged for me based on my life's work. As a social worker for over thirty years, I have had the good fortune to work within communities with populations that I loved. With similar respect, I have served in the church within a number of Christian congregations since adolescence. When the opportunity presented itself to start an agency, it immediately occurred to me that it could be a chance to bring together all the labor I had put into the field of social work. The same was true when I invited myself – some would say called, to study theology. This dissertation is my challenge at bringing these two worlds together. The writing represents and is drawn from a clear social work foundation that utilizes a number of theories based on my understanding of best practices. I have also tried to use scripture in a similar way, weaving both together in what I hope to be a coherent, practical, and enlightened way.

I do not consider there to be one best theory in the practice of social work. Similarly, I have also drawn from several scriptural passages that I believe to be relevant as this dissertation has been woven together. Exegesis is the Biblical practice of using ancient scripture to interpret and add context to contemporary issues. Biblical verses will be drawn from throughout this paper to connect my professional knowledge as a social worker and what I have learned in the study of theology. My hope is that this paper is the successful integration of both these worlds.

My demonstration project and this dissertation are the two major components in the process of obtaining my Doctorate in Ministry. This effort reflects the work that I have done since 2014, when my business partner and I established New Life Counseling and Mental Health. Our mission is to serve the community and improve the lives of those we counsel through the

provision of mental and behavioral health counseling. As a therapist, I am grateful for the opportunity to make a difference on my community. This demonstration project has helped me to advance and expand my understanding and access toward achieving this goal.

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CHAPTER 1: INTRODUCTION TO THE SETTING

The history and development of New Life Counseling and Mental Health began one evening in the fall of 2013, when a colleague, called me with a proposal. She wanted to start a counseling practice and wanted to know if I would be interested in partnering with her. I asked why she wanted to do this, and her reply was, "I want my own agency. Representation in leadership is very important." My response was that I would think about it and call her back the next day. I discussed the matter briefly with my spouse, Kevin Clark, said a prayer and called her back saying that it sounded like a great idea and that I would be very interested in starting an agency from the ground up! At the time, my business partner was a student assistance counselor who has since progressed on to become a vice principal. I continued to work within the school system as a school based social worker up until my recent retirement. Our respective clinical licenses in counseling and social work had enabled us to work as in-home therapists for other agencies. Our plan was to design a culturally sensitive and welcoming counseling practice that would incorporate both in home counseling for youth and adolescents, and out-patient counseling for adults and couples in an agency setting. Fortunately, my membership at New Life Christian Church lent itself as an opportunity to rent space within the building at a very affordable rate as we were a start-up business without an operating budget.

Initially all we had was a generalized vision and dream for what we wanted to do. We had no business plan or financial backing. My pastor would always talk about setting goals, starting new businesses, and going back to school. I also understood the value of lifelong learning. Now for us this was really happening and becoming a reality. "Faith is the assurance of things hoped for, the conviction of things not seen" (Hebrews 11:1). This was the basis of my prayer and became our

marching orders. Believing that God would get us through, providing guidance and illuminating the pathway for us, forgiving and sustaining us throughout the rough spots that we knew would surely come. We started off by dutifully going to as many meetings as our schedules would allow, gathering information and talking to everyone we thought could help us with our plan to establish our agency. In due time, we went to a meeting where in conversation, a care manager recommended that we contact one of the largest child-care agencies in New Jersey. After a discussion with the agency, the Director of Community Resources wrote a letter on our behalf recommending that we get our first contract because of my being an African American male therapist who met an unfilled need in the behavioral health community. As a result of the letter to the state of New Jersey, we received our first contract. Since that time, we have gone on to receive contracts with five counties within New Jersey to provide in-home behavioral health counseling to children and families. We also applied for commercial insurance which allows us to see clients and bill their insurance. Since our official beginning in 2014, we have grown in capacity. We currently serve over 100 youths and adolescents throughout NJ and treat over 50 adults and couples in our out-patient component.

New Life Counseling and Mental Health (NLC&MH) is an African American mental health practice that primarily serves people of color. This is true for our staff as well as the clients. However, we were recently approached by a care manager from one of the care management organizations that we work with about being the site for her graduate social work field placement. She is of Portuguese American decent. We are hoping that she will be able to contribute to New Life Counseling and Mental Health on multiple levels - as a care manager, a person with perspectives from her ethnicity and as a student intern with our agency. We also added a therapist

who is Caucasian who expressed interest in working with us. In both instances we were very transparent about the culture and philosophy of NLC&MH, of which they are comfortable. Likewise, they present us with an opportunity for us to further diversify of our staff. Gender is always a challenge in a profession that is dominated by females. While we do have a significant number of males that work with us, our staff is primarily female. This remains a glaring disparity not only within our agency in the need to meet the number of requests for African American male therapists, but within the field of counseling, therapy, and behavioral health as well.

Agency Location

Our agency is located at in Bloomfield, NJ. Our office is upstairs from New Life Christian Church. There are several other agencies and programs in the building which are:

- New Life Daycare
- New Life Medical Health and Wellness
- New Life Counseling and Mental Health
- AA and NA support groups
- Community Support Meetings

We are fortunate that we are all located in the same building steps from one another because this allows for collaborative approach to treatment and sustainability for our clients. When appropriate, an invitation is extended to clients to the church's Sunday service. Our pastor has officiated the marriage of couples that have been seen by New Life Counseling for couple's counseling. Because we are open and affirming our church, medical and counseling services welcome LBGTQ+ youth, individuals, and couples. Our pastor has also done marriage ceremonies for LBGTQ+ couples. Recently, I have been asked to officiate at wedding for a couple that I have

been counseling for two years. When they initially brought the issue to me, I thought that it was in reference to me finding someone to conduct the ceremony for them until they told me that I was their choice because of the familiarity they had with me. I am currently researching the current options for becoming licensed to perform marriages. My business partner is of the Muslim faith; however, our philosophy is to be part of the big tent, we want to bring in as many people as we can on a regular basis.

We are fortunate to have a large parking lot. Prior to the covid-19 pandemic, the parking lot would be full on any given day or night - sometimes even more so than on Sunday mornings with people coming not just for worship service, but also for one of the other programs in the building counseling, medical treatment, or AA/ NA meetings. We have often been upstairs at our counseling agency while the health clinic was busy seeing patient's downstairs. Both agencies have seen numerous clients that the pastor has invited to fellowship from AA/NA to various other support groups. The building is in constant use from the three operating businesses with the added component of musicians practicing and playing music in the sanctuary. In many ways our setting has become a community center because of the comfort, diversity of activity and relaxed atmosphere. I believe that we work to ensure that everyone who comes to the building feels welcomed - understanding that New Life was first a church and that all the entities that have since been established since then stem from this origin regardless of why they are there. In this sense, we see all these entities as a form of ministry, fellowship, and service to the community.

The floor plan of the building is designed for service and shared space. The entrance has two front doors. To the left is New Life Daycare, the door to the right is for New Life Health and Wellness, our medical practice is located at the front of the building, a stairway to the left leads up

to New Life Counseling and Mental Health and an entrance to the right leads to the church sanctuary. Upon entering there is a front desk, waiting/reception area and two exam rooms and two rest rooms. Going through this area is the entrance to the church's sanctuary. While our agency is located on the second floor, we can make accommodations to meet clients on the first floor if they lack mobility.

When the building was purchased by the church 15 years ago, it was literally a laundry factory that required extensive renovations. To date, the sanctuary, day care, medical clinic and fellowship hall have been completely renovated. Our counseling agency paid for new cabinetry in the fellowship hall. We will continue to renovate the building as our finances grow. Upstairs, we have put in a HVAC system as there was no heat at all on the second floor. We painted, and most recently put in new windows. As these renovations continue, we are optimistic that our programs will become more robust. Interestingly, most of our furniture, plants and artifacts have been donated. I am also a visual artist, so I have paintings in both the medical and mental health practices. We also have original artwork painted by me placed on the walls throughout the building. Interestingly, I have recently become aware of the beliefs and practices around aesthetics. A client recently told me that some of those in the Muslim faith do not believe in putting artwork on the walls. It is perceived as idolatry. Yet, people most often describe the space as a loft like setting.

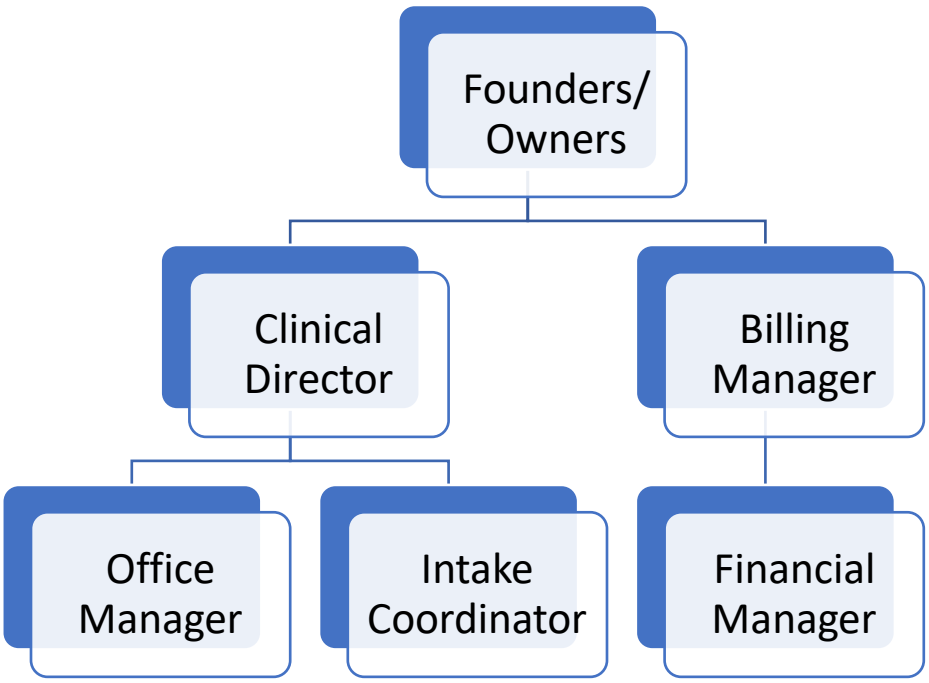
Clientele

Our clients are diverse, we have witnessed an increase of people that are transplants from New York, but now live in New Jersey because the cost of housing is much lower. With the advent of telehealth, we are seeing clients virtually which has greatly expanded the agency's reach. I have counseled a youth as far away as Puerto Rico, while he was on vacation via telehealth. I currently

have a client living in Haiti. The agency is in Bloomfield, NJ, a community that is low to middle income and ethnically diverse. Residents are primarily people of color that include African Americans, Afro-Caribbean's, Latinx, and Asians.

Agency Structure and Decision Making

The following is the organizational chart for New Life Counseling operations:



The decision-making process within our organization is always collaborative and based on information and feedback we get from our contracted agencies, youth, and families. The flow of information and thoughtful customer service is critical as we are solely dependent on our contractors for referrals.

Communication and Social Media

New Life Counseling Center is on Facebook and has a website which has been extremely beneficial in terms providing information on our agency to potential clients. Our experience is that most of our clients have visited our website prior to contacting us. Our website is: Wellness@newlifementalhealth.com. In the current age of COVID-19, 90% percent of our services are now virtual. We will transition to a balance of in-person services as health and safety conditions improve. However, most of our clients now prefer telehealth because it is much more convenient and can be done anywhere there is internet connection.

Our Mission Statement

New Life Counseling and Mental Health LLC., is a caring and comprehensive mental health private practice. Our approach is holistic and creative in helping our clients to achieve their fullest potential. We recognize the need to address the whole person as a mental, physical, and spiritual being. Based on a need's assessment, we utilize a combination of treatment modalities. Our focus is to assist clients in reaching your treatment goals effectively and efficiently within a supportive, caring, and non-judgmental therapeutic environment. We are respectful, sensitive, and aware of cultural, racial, and gender differences; and promote this awareness through our counseling principles**.** While our primary mode of counseling is cognitive behavioral therapy, we are also experienced in the following:

- Trauma Focused Therapy
- Anxiety/Depression
- Grief and Loss
- Art therapy Play Therapy

We have worked extensively with LBGTQ+ adults, couples, youth, and their families. Through linkages, we can link them with comprehensive supportive resources. We offer direct on-site referrals to healthcare and medication management.

Challenge Statement

As an African American Licensed Clinical Social Worker for over 30 years, I know that youth of different backgrounds and ethnicities do not experience trauma equally. Nationally, 61 percent of Black children have suffered at least one adverse experience, compared with 40 percent of White children.[1] This impact is felt most amongst Black male adolescents in their behavior, emotional development, and educational outcomes. This project will use New Life Counseling and Mental Health as its site to design a restorative mentoring/counseling approach to address the distress that Black male youth experience.

[1] Williams, D. R., Neighbors, H. W., & Jackson, J. S. 2003. Racial/ethnic discrimination and health: Findings from community studies. American Journal of Public Health, 93, 200-208. Retrieved from http://ajph.aphapublications.org

CHAPTER 2: ANALYSIS OF THE CHALLENGE

My professional career has been spent advocating and working on behalf of at-risk African American youth with a particular emphasis on male adolescents which I like to think of the last stop before adulthood. When I refer to the characteristics that place black boys at risk, I am referring to the following areas:

1. Anger management
2. Impulsivity
3. Focus and attention
4. Decision making
5. Social and communication skills.

There is often an intersectionality of the above identified characteristics. A recent report by the Annie E. Casey Foundation which examined a dozen milestones across racial groups, highlighted the widening gap between blacks and other groups in education, health, and overall well-being from birth to early childhood.[2] Black males remain one of the most underserved populations in the mental health field.[3] A contributing factor to this disparity is the lack of Black counselors and

[2] The Annie E. Casey Foundation, KIDS COUNT Data Center. (2017). The Annie E. Casey Foundation. Retrieved from http://datacenter.kidscount.org/data/tables/65-median-family-income-among-households-with-children?loc=1&loct=2#ranking/2/any/true/870/any/365.

[3] Uzzell, K. (2008). The healthy psychosocial development of Black males: The relationship between wellness and racial identity development. Dissertation Abstracts International: *The Humanities and Social Sciences*, 68(12). ProQuest, University of Michigan. Ann Arbor MI.

therapists.[4] Strategies should also include family, friends, neighbors, coworkers, clergy, and others.[5] The color of someone's skin does not determine their level of effectiveness or empathy as a therapist. However, if you walk into a therapist's office and see that they are also African American, there is an implicit feeling of having a connection because you both have had more of a similar experience as a Black person in white America.[6] Having people of color work with this population, especially young Black youth, is important. Not only do they need to see positive images of Blacks in their communities, but they also need to feel understood by someone who is helping them as they face adversities that are race related. Based on this knowledge, I now have had the opportunity to make more of an impact with African American males in my role as a licensed clinician. Understanding that mentoring is a big part of my role as their therapist in terms of being a role model.

Puberty is a pivotal developmental age because the youth is in between childhood, adolescence, and young adulthood.[7] [8]The young person still retains some of their obedience and naivete from childhood while in the process of starting to figure things out on their own. My experience is that they are still willing to trust and engage with certain adults if they have a relationship with them.

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[4] Hammond, W.P. Taking it like a man: Masculine role norms as moderators of the racial discrimination-depressive symptoms associated among African American men. *American Journal of Public Health*, 102(S2), S232-S241, 2012

[5] Thompson Sanders, V. L., Bazile, A., & Akbar, M. (2004). African Americans' perceptions of psychotherapy and psychotherapists. Professional Psychology: Theory, Research and Practice 35(1), 19-26. doi:10.1037/0735-7028.35.1.19

[6] Thompson Sanders, V. L., Bazile, A., & Akbar, M. (2004). African Americans' perceptions of psychotherapy and psychotherapists. Professional Psychology: Theory, Research and Practice 35(1), 19-26. doi:10.1037/0735-7028.35.1.19

[7] Erikson, E. (1959). *Identity and the life cycle*. New York, NY: W. W. Norton.

[8] Erikson E. (1963). *Childhood and society*. New York: W. W. Norton & Company.

However, this is also a time when there is the emerging influence of peer pressure, the youth's need for independence and to begin making decisions on their own coupled with the influences of the larger society. During the time, young people often make these decisions based on the immediacy of their environment. It is critical to still provide guidance and help them in this process.

How Environment Affects Mental Health

Everything from the house, city, and the state you live in to the weather in your area, the social climate, and your work environment can affect your mental health. These places you spend a lot of time in can have a significant impact on your well-being—both physically and mentally. So, it makes sense to take a closer look at how the environment affects your mental health. "Our environment is a combination of both physical factors such as where you live and the people around you both in your home but also on a wider community scale," says Rachelle Scott, MD, medical director of psychiatry at Eden Health. Other environmental factors that can have a significant impact on mental health include poverty, crime, and environmental racism. For example, research has found that a person's housing environment can play a role in their well-being. Another study found that crime as well as the fear of crime had a substantial effect on mental well-being.[2]

Environmental racism, defined as racial discrimination in environmental policymaking, has also been implicated as an important environmental factor that affects the mental health of BIPOC individuals and communities. Higher rates of pollution also affect mental health. Scott points to research that shows increased rates of depression in more polluted areas.[4] "The effect of mold, if present, in the home and higher rates of asthma as a result of increased pollutants themselves, can also excrete mental health issues." Yet, picking up and moving from one environment to another permanently is not always an option for many of us. I counseled a 16-year-old male, who among

other challenges smoked marijuana and Black and Mild cigars daily. He texted me one day asking me to buy him pizza. Initially, I thought - why he couldn't take the money he was using to smoke to buy pizza. But then I realized that everyone he was around, all his neighborhood peers, smoked; and the stores all around him starting at his corner, where all boarded up. His options were severely limited. If his peer group, including family members grew up smoking, they were his examples and his community had extremely limited options for him to choose from. To do this work, the need to understand brain development recognizes the importance of cognitive functioning in assessing a youth.

This paper is heavily slanted on the impact of trauma and the lived experiences related to racism against the male adolescents that I counsel. However, also looking at and understanding brain development as it relates to behavior and cognitive functioning gives a much better picture overall performance. There is no better source of collateral information than psychological/psychiatric evaluations to give a clear, comprehensive picture of the youth and why and how he reacts to the world around him.

The WAR Cycle

There is also a theory known as the World of Abnormal Rearing or the WAR Cycle. The premise is, that dysfunctional behavioral in norm for certain families and anyone that does not fit in becomes the outcast or misfit. Child abuse and neglect diminish the victim's long-term ability to have close personal relationships and approach life out of a sense of self-worth. The 'World of Abnormal Rearing' (WAR) refers to rearing in which a child does not learn basic interpersonal skills. Under a condition of WAR, children do not learn how to have their needs met through acceptable behavior. They either receive confusing messages about how their needs can be met or

learn unacceptable behaviors for meeting their needs. Children must also learn that they are responsible for their own actions. It is not uncommon under WAR for children to have to bear responsibility for their parents' behavior, in that the parents attribute their own moods and behaviors to what the child has done or not done. The WAR also gives children little practice in creative problem solving, since they are not given a structure of options for rational decision making. Such children are also convinced they cannot trust others, and they are shown daily that feelings and actions are one and the same, such that there is a sense that one's life cannot be managed without acting on every feeling. If these children grow up without therapeutic intervention and become parents themselves, another WAR is created for another child growing up.[9]

The Developing Brain

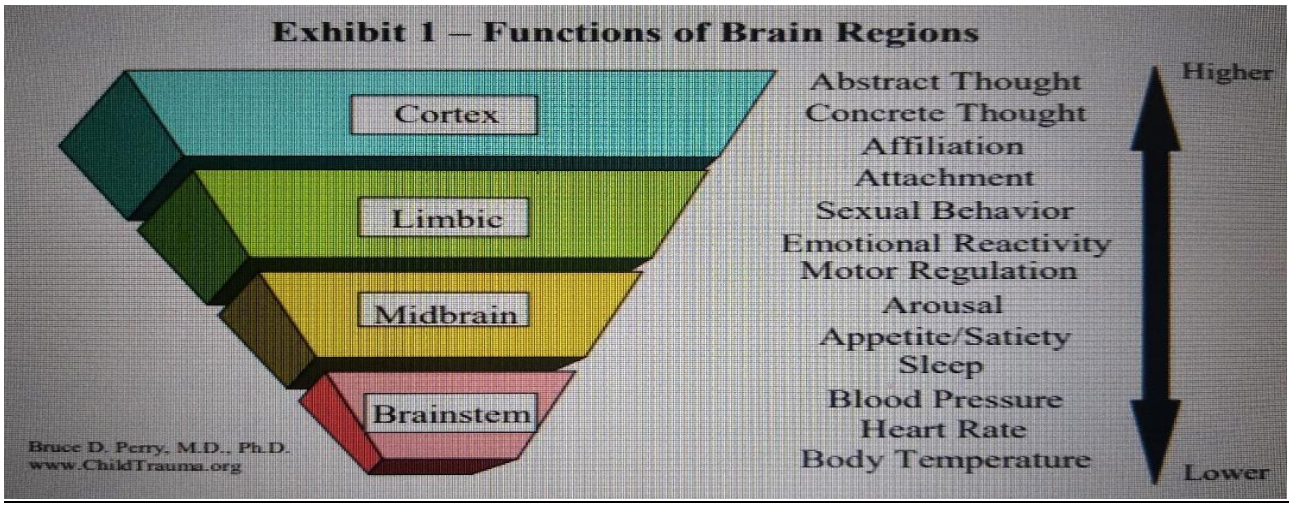
The process of brain development helps us understand more about the roles both genetics and the environment play in our development. It appears that genetics predispose us to develop in certain ways, but our experiences, including our interactions with other people, have a significant impact on how our predispositions are expressed. In fact, research now shows that many capacities thought to be fixed at birth are dependent on a sequence of experiences combined with heredity. Both factors are essential for optimum development of the human brain. Early brain development the raw material of the brain is the nerve cell, called the neuron. During fetal development, neurons are created and migrate to form the various parts of the brain. As neurons migrate, they also differentiate, or specialize, to govern specific functions in the body in response to chemical signals. This process of development occurs sequentially from the “bottom up,” that is, from areas of the

[9] Child Welfare Information Gateway. /pubs/issue-briefs/brain-development.
Understanding the Effects of Maltreatment on Brain Development https://www.childwelfare.gov 5.
https://www.childwelfare.gov/pubs/issue-briefs/brain-development and recall it in certain unconscious ways. 2011

brain controlling the most primitive functions of the body (e.g., heart rate, breathing) to the most sophisticated functions (e.g., complex thought).

The first areas of the brain to fully develop are the brainstem and midbrain; they govern the bodily functions necessary for life, called the autonomic functions. At birth, these lower portions of the nervous system are very well developed, whereas the higher regions (the limbic system and cerebral cortex) are still rather primitive. Higher function brain regions involved in regulating emotions, language, and abstract thought grow rapidly in the first 3 years of life.[10]

Exhibit 1 – Functions of Brain Regions



Bruce D. Perry. ChildTrauma.org

[10] Child Welfare Information Gateway. /pubs/issue-briefs/brain-development.
Understanding the Effects of Maltreatment on Brain Development https://www.childwelfare.gov 5.
https://www.childwelfare.gov/pubs/issue-briefs/brain-development and recall it in certain unconscious ways. 2011

Exhibit 2 – Illustration of Brain Areas

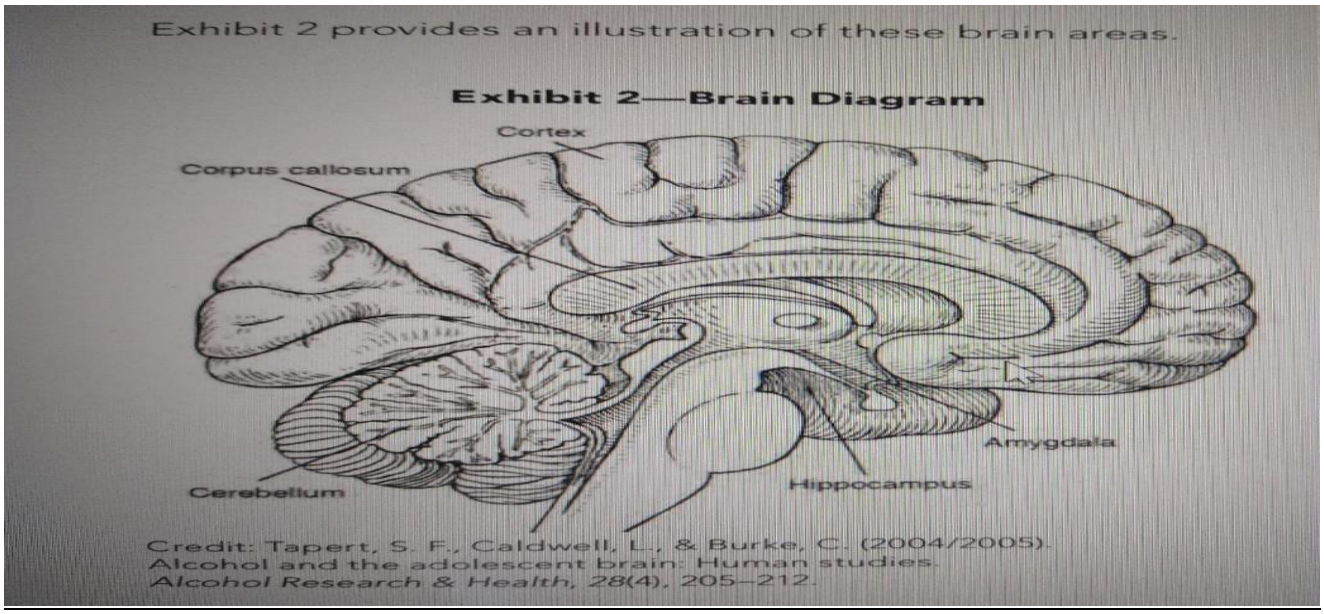


Exhibit 2 provides an illustration of these brain areas.
Exhibit 2—Brain Diagram
Cortex
Corpus callosum
Amygdala
Cerebellum
Hippocampus
Credit: Tapert, S. F., Caldwell, L., & Burke, C. (2004/2005). Alcohol and the adolescent brain: Human studies. Alcohol Research & Health, 28(4), 205–212.

Memories

The organizing framework for children's development is based on the creation of memories. When repeated experiences strengthen a neuronal pathway, the pathway becomes encoded, and it eventually becomes a memory. Children learn to put one foot in front of the other to walk. They learn words to express themselves. And they learn that a smile usually brings a smile in return. At some point, they no longer must think much about these processes—their brains manage these experiences with little effort because the memories that have been created allow for a smooth, efficient flow of information. The creation of memories is part of our adaptation to our environment. Our brains attempt to understand the world around us and fashion our interactions with that world in a way that promotes our survival and, hopefully, our growth, but if the early environment is abusive or neglectful, our brains may create memories of these experiences that adversely color our view of the world throughout our life. Babies are born with the capacity for

implicit memory, which means that they can perceive their environment This material may be freely reproduced and distributed.[11]

The Impact of Trauma on Memory and the Developing Brain

Infants recognize their mother's voice from an unconscious memory. These early implicit memories may have a significant impact on a child's subsequent attachment relationships. In contrast, explicit memory, which develops around age 2, refers to conscious memories and is tied to language development. Explicit memory allows children to talk about themselves in the past and future or in different places or circumstances through the process of conscious recollection. Sometimes, children who have been abused or suffered other trauma may not retain or be able to access explicit memories of their experiences; however, they may retain implicit memories of the physical or emotional sensations, and these implicit memories may produce flashbacks, nightmares, or other uncontrollable reactions. This may be the case with very young children or infants who suffer abuse or neglect.[12]

Responding to Stress

We all experience different types of stress throughout our lives. The type of stress and the timing of that stress determine whether and how there is an impact on the brain. The National Scientific Council on the Developing Child outlines three classifications of stress: Positive stress is moderate, brief, and generally a normal part of life (e.g., entering a new childcare setting). Learning to adjust to this type of stress is an essential component of healthy development. Tolerable stress includes events that have the potential to alter the developing brain negatively, but which occur

[11] Child Welfare Information Gateway. /pubs/issue-briefs/brain-development.
Understanding the Effects of Maltreatment on Brain Development https://www.childwelfare.gov 5.
https://www.childwelfare.gov/pubs/issue-briefs/brain-development and recall it in certain unconscious ways. 2011
[12] Ibid

infrequently and give the brain time to recover (e.g., the death of a loved one). Toxic stress includes strong, frequent, and prolonged activation of the body's stress response system (e.g., chronic neglect). Healthy responses to typical life stressors (i.e., positive and tolerable stress events) are very complex and may change depending on individual and environmental characteristics, such as genetics, the presence of a sensitive and responsive caregiver, and past experiences. A healthy stress response also known as eustress, involves a variety of hormone and neurochemical systems throughout the body, including the sympathetic-adrenomedullary (SAM) system, which produces adrenaline, and the hypothalamic pituitary-adrenocortical (HPA) system, which produces cortisol. Increases in adrenaline help the body engage energy stores and alter blood flow. Increases in cortisol also help the body engage energy stores and can enhance certain types of memory and activate immune responses. In a healthy stress response, the hormonal levels will return to normal after the stressful experience has passed.[13]

Effects of Maltreatment on Brain Development

Just as positive experiences can assist with healthy brain development, children's experiences with child maltreatment or other forms of toxic stress are also known as distress. Factors such as domestic violence or disasters, can negatively affect brain development. This includes changes to the structure and chemical activity of the brain (e.g., decreased size or connectivity in some parts of the brain) and in the emotional and behavioral functioning of the child (e.g., over-sensitivity to stressful situations). For example, healthy brain development includes situations in which babies' babbles, gestures, or cries bring reliable, appropriate reactions from their caregivers. These caregiver-child interactions—sometimes referred to as "serve and return"—

[13] Child Welfare Information Gateway. /pubs/issue-briefs/brain-development.
Understanding the Effects of Maltreatment on Brain Development https://www.childwelfare.gov 5.
https://www.childwelfare.gov/pubs/issue-briefs/brain-development and recall it in certain unconscious ways. 2011

strengthen babies' neuronal pathways regarding social interactions and how to get their needs met, both physically and emotionally. If children live in a chaotic or threatening world, one in which their caregivers respond with abuse or chronically provide no response, their brains may become hyperalert for danger or not fully develop. These neuronal pathways that are developed and strengthened under negative conditions prepare children to cope in that negative environment, and their ability to respond to nurturing and kindness may be impaired.[14]

Based on this research and knowledge, I now have had the opportunity to make more of an impact with African American males in my role as a licensed clinician. Understanding their experience of trauma and abuse is an essential realization, noting the importance of providing a restorative relationship through a combination of counseling and mentoring has become pivotal part of my role as their therapist and role model.

Adolescence and Counseling Relationships

Puberty is a pivotal developmental age because the youth is in between childhood, adolescence, and young adulthood (Erikson, 1959, 1963). I like to call is the last stop before young adulthood. The young person still retains some of their obedience and naivete from childhood while in the process of starting to figure things out on their own. My experience is that they are still willing to trust and engage with certain adults if they have a relationship with them. However, this is also a time when there is the emerging influence of peer pressure, the youth's need for independence and to begin making decisions on their own coupled with the influences of the larger society. During the time, young people often make these decisions based on the immediacy of their environment. That is why it is critical to still provide guidance, provide positive experiences that help them navigate through this process.

[14] Ibid

A Brief History of Brutality and Violence Against African Americans

As the activist Julian Bond once stated, "America, after all, unscrambles, spells "I am race." It has been four hundred years since "20 and odd" enslaved Africans stolen form what would now be Angola, disembarked in the privateer White Lion at Point-Comfort, Virginia, in 1619. Much of that time has seen the active, vicious oppression of Black people in this country, 250 years of slavery, 100 years of Jim Crow, and now 50-plus years of mass incarceration.

This country has sustained a long history of brutality against African Americans. During the period that followed the enslavement of Africans, the period between 1877 and 1950 saw over four thousand African Americans lynched, at a rate of at least one a week on average for some infraction of the racial hierarchy. While the South was widely associated with this form of terrorism, racism and violence were not localized. Cities in the North and West all experienced their own forms of segregation, bigotry, and violence. Racial tensions were always inflamed when Blacks sought out more opportunities for decent lives to better their circumstances. According to the US Department of Labor's Division of Negro Economics report, "Negro Migration in 1916-17," detailed the fact that Negro migration from the South to the North was predominantly one of single men. 70 to 80 percent of the migrants were men with no families. The response to these men, many of whom were now war veterans, was a massive violent backlash. The NAACP called the riots that occurred during the summer of 1919 "Red Summer." In 10 months, an estimated 250 people were killed – including nearly 100 lynched – in riots in the streets in at least 25 cities. From the period, 1917, to the Rosewood Massacre in Florida, the death total mounted more than 1,100 deaths. This period extended through 1950 totaling over four thousand African Americans lynched.[15] The civil rights

[15] Capeci Jr., D. J. (1977). "From Different Liberal Perspectives: Fiorello La Guardia, Adam Clayton Powell, Jr., and Civil Rights in New York City, 1941-1943." *Journal of Negro History (*62)160-73.

movement of the latter half of the 20th century has re-ignited the struggle for human justice and dignity that continues today. Yet, the legacy of terror, injustice and its resulting trauma on the African American community remains.

There is a connection between the lynching that Blacks in the South fled during the Great Migration and the oppressive policing that currently goes on resulting in the killing of predominantly unarmed African American males. Tamir Rice, a 12-year-old Black male, was shot within 1.5 seconds after being encountered by police in Cleveland. Eric Garner was choked to death in Staten Island. Freddie Gray died of a severed spine in the back of a police car. Sam Dubose was shot through the head during a traffic stop in Cincinnati. Philando Castle was shot in a car with his girlfriend and daughter near St. Paul. Michael Brown was killed in Ferguson, outside St. Louis. Laquan McDonald was gunned down in the street in Chicago. Stephon Clark was killed in his grandmother's backyard in Sacramento. George Floyd was suffocated with a knee on his neck in Minneapolis. Breonna Taylor killed while sleeping in her own home Louisville. Sandra Bland found hung in jail Waller County, Texas**.** Tragically, the list continues far beyond this writing.

The Targeted Terrorism of African American Males

Aggressive police policies such as 'stop and frisk' were deployed to harass and intimidate young Black men. In 2012, the *New York Times* featured the story of a young man named Tyquan who had been stopped between the ages of fifteen and eighteen "60 or 70 times" or "four or five times in a month." When stop and frisk hit its peak in 2011, there were 685,724 stops, according to the New York Civil Liberties Union.[16] "Young Black and Latino men were the targets of a hugely disproportionate number of stops. Though they account for only 4.7 percent of the city's

[16]New Work Civil Liberties Union. (2012). "Young black and Latino men": Stop and Frisk. *New York Civil Liberties Union* Briefing, https://www.nycl.org/sites/default/files/publications/NYCLU_2011_Stop_Frisk_Report.pdf/

population, Black and Latino males between the ages of 14 and 24 accounted for 41.6 percent of stops in 2011. The number of stops of young Black men exceeded the entire city population of young Black men (168,126 as compared to 158,406). Ninety percent of young Black and Latino men stopped were innocent."[17] A Kaiser Family Foundation poll asked respondents of they had ever been stopped or detained by police because of their race or ethnicity.[18] Forty-one percent of Black people said yes as compared to five percent of whites.

As Brian Stevenson of the Equal Justice Institute explained, when lynching's stopped, executions picked up, "the mobs moved to magistrates. Executions moved into virtual space. We have access to unlimited images of Black death on the phones in our pockets. State violence performed as street violence became streamed violence."[19] Acts of terror took on another dimension with the advent of recorded video, beginning with Bull Conners vicious use of dogs and fire hoses on Black youth in Birmingham in the 1960's. Activist Angela Davis once stated that violence was so common growing up in her activist home that her street became known as "Dynamite Alley."[20] In 1991, the police beating of King caught on video filmed by a private citizen became yet another example of this kind of brutality. The video showed police officers taking turns hitting and kicking him in the head as he lay on the ground in Los Angeles.

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[17] Palosky, C. (2020). "Poll: 7 in 10 Black Americans Say They Have Experienced Incidents of Discrimination or Police Mistreatment in Their Lifetime, Including Nearly Half Who Felt Their Lives were in Danger"

[18] *Kaiser Family Foundation.* https://www.kff.org/disparities-policy/press-release/poll-7-in-10-Black-Americans-say-they-have-experienced-incidents-of-discrimination-or-police-mistreatment-in-lifetime-including-nearly-half-who-felt-their-lives-were-in-danger/.

[19] *Kaiser Family Foundation.* https://www.kff.org/disparities-policy/press-release/poll-7-in-10-Black-Americans-say-they-have-experienced-incidents-of-discrimination-or-police-mistreatment-in-lifetime-including-nearly-half-who-felt-their-lives-were-in-danger/.

[20] Davis, A. Y. (1983). Women, Race and Class. New York: Random House.

These historical events served to create and sustain a perpetual state of Black Trauma. In response to this country's failure to value and protect the lives of its citizens of African descent, a current movement has emerged unpretentiously known as - Black Lives Matter. As a strategy of physical and psychological self-defense, this movement seeks to stand up against the intrenched violence and racism that is waged against black bodies. As the fight against violence, harassment and discrimination lingers throughout the nation; this movement has now grown and become recognized throughout the world, continuing to tell the counter-story of the struggles that we as a people have faced and overcome.

Trauma Defined – A deeply distressing or disturbing experience. A shock following a stressful event or a physical injury, which may be associated with physical shock and sometimes leads to long-term neurosis.[21] "He called out for his dead mother. He called out for his children. Knee on his neck, chest to the pavement, the life slowly being pressed out of him by an officer whose demeanor was so unbothered that the sunglasses pushed back to the peak of his head were never disturbed. George Floyd was killed, casually, callously, in the street, in the full light of day, with witnesses watching, recording, and objecting. This single act of morbid street theater, this murder Minneapolis, struck at something in the social consciousness. There had been other killings of unarmed Black people, but this was different. This was depraved. This was disgusting."[22] Perhaps, it was these very circumstances that led to his precedent setting conviction.

Although law professors Margaret A. Burman and Margaret Russell have argued that there are hundreds of African Americans who disappeared and were victims of racial violence from

[21] Condon, F. (2012). I Hope I Join the Band: Narrative, Affiliation, and Antiracist Rhetoric. Logan: Utah State UP

[22] Fowers, A.W. (2020). Depression and Anxiety Spiked among Black Americans after George Floyd's Death, Washington Post, https://www. Washingtonpost.com/health/2020/06/12/mental-health-george-floyd-census/.

1930 to 1960 with no justice or resolution. Many people identify Emmett Till's murder as the first "Black Lives Matter" story. In his book, *Death of Innocence*, Christopher Benson, says Till's death caused an immeasurable impact on young Black people at the time in a way that would not be seen again until the killing of seventeen-year-old Trayvon Martin by a neighborhood vigilante in 2012.

Vicarious Traumatization/Perpetual Trauma Diagnosed

We are surrounded by constant reminders that race-related danger can occur at anytime, anywhere, to anyone. We might see clips on the nightly news featuring unarmed African Americans being killed on the street, for holding a cellphone, or even in a church. Learning of these events brings up an array of painful racially charged memories, and what has been called "vicarious traumatization." Even if the specific tragic news item has never happened to us directly, we may have had parents or aunts who had similar experiences, or we know people in our community who have, and their stories have been passed down. Over the centuries the Black community has developed a cultural knowledge of these sorts of horrific events, what then primes us for traumatization when we hear about yet another act of violence. Another unarmed Black man has been shot by police in our communities and nowhere feels safe.

The results of a weekly survey by the US Census Bureau say that "the rate of blAmericans showing clinically significant signs of anxiety and depressive disorders jumped from 36 percent to 41 percent in the week after the video of George Floyd's death became public, representing an increase of 1.4 million people.[23]

[23] United States Census Bureau. 2011. The black population: 2010 census brief. Retrieved from http://www.census.gov/prod/cen2010/briefs/c2010br-06.pdf

WE ARE
NOT
THUGS!

SPECIAL TODAY
POLICE

BLACK CHILDREN ARE ALL OURS
96 St
6

Police Reform
NOW!

CLOTHING
& SHOES
BEST
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EVER

Theoretical Approach – Critical Race Theory

A central focus of this paper will be Critical Race Theory (CRT) and how it influences the self-concept and behavior of male adolescents. CRT was created during the 1987 Critical Legal Studies National Conference. It set forth the terms of racial conscious and set out to uncover how laws constructed race and social relations in ways that whites often recognize. CRT originated in law schools in the late 1980's and arose out of the lived experiences of students and teachers of color.[24] It brought together issues of race, and racism to address the liberal notion of color blindness, it argues that ignoring racial differences maintains and perpetuates the status quo with its deep institutional injustices to racial minorities.[25]

[24] Solorzano, D., Ceja, M., & Yosso, T. (2000). Critical race theory, racial microaggressions, and campus racial climate: The experiences of African American college students. *Journal of Negro Education*, 69(1/2), 60-73.

[25] Martinez, A, (2014). *Critical Race Theory: Its Origins, History, and the Importance to the Discourses and Rhetoric's*

I have chosen to utilize critical race theory as basis for understanding the historical, sociological, and critical origins for these differences. It is crucial to use theory and practice to dismiss or decenter racism and those whose lives are impacted by it daily. Violence, death, mass incarceration, and the stripping of humanity are tradition in this country. While, multi-culturalism may celebrate some aspects of food, language, and dance, it does not delve into the dirty details of American history. Within the broader context, racism is still seen as visible behavior from one person to another. Despite the civil rights movement which was thought to dismantle systemic racism and institutional prejudice, discrimination, and the inequities that remain the daily lived realities for people of color in the US. Although always present, the elements of CRT began to formally take shape with events surrounding the 1981 student protest, boycott, and resulting organization of an alternative course on race and the law at Harvard Law School, when its' administration refused to hire a teacher of color to replace Derrick Bell, who left the institution in 1980. He was only one of two African American law professors at Harvard following the civil rights movement. He left to become Dean of University of Oregon Law School. While student activists demanded the hire of a professor of color, they were told by administration that "there were no qualified black scholars who merited Harvard's interest."

One of the key components of CRT is intersectionality. All philosophies have inherent implications. Critical race theory is no exception. There are two important implications in CRT, the first of which is intersectionality.[26] Intersectionality as, "The theory that various forms of discrimination centered on race, gender, class, disability,

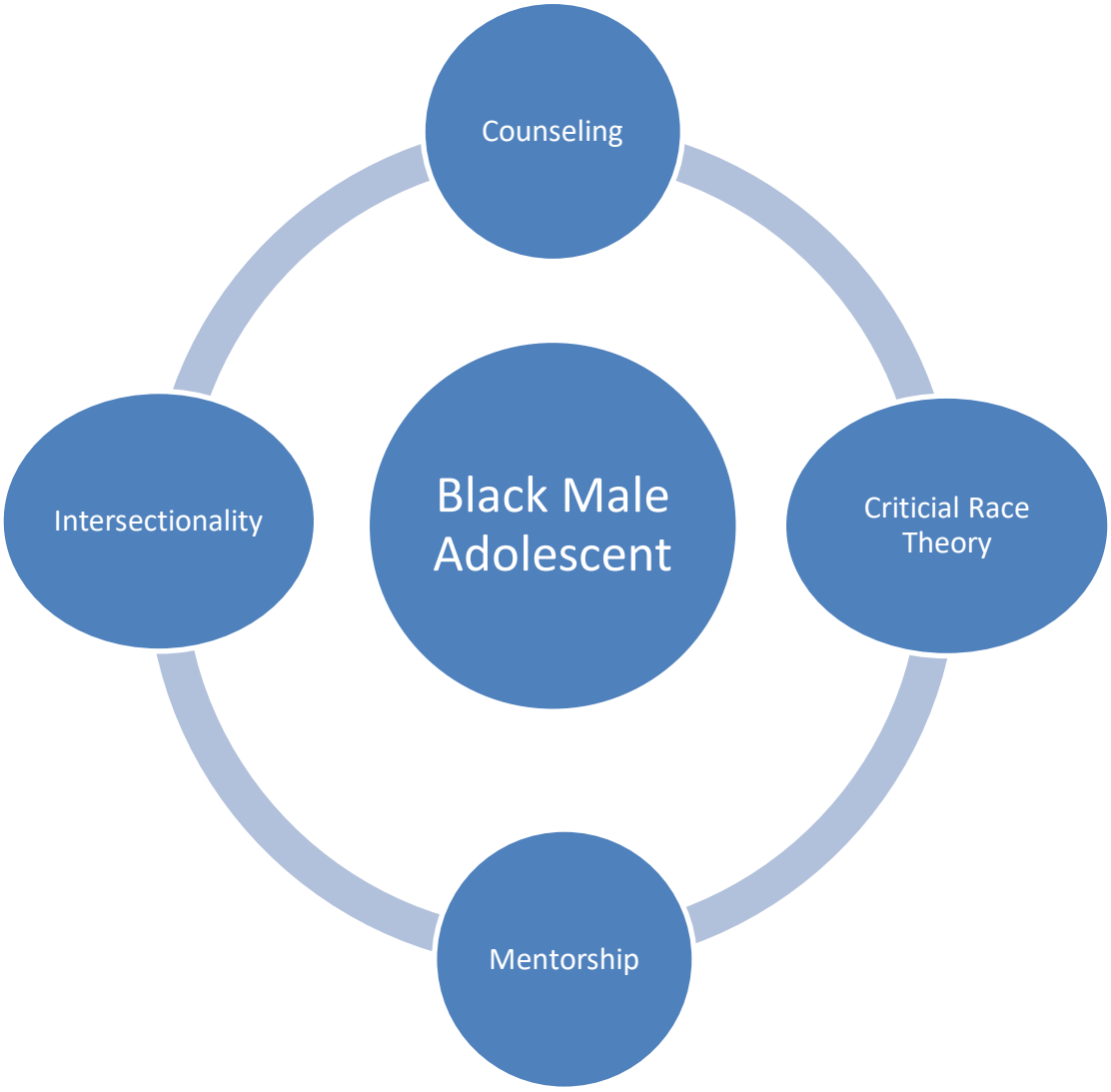
[26] Solorzano, D., Ceja, M., & Yosso, T. (2000). Critical race theory, racial microaggressions, and campus racial climate: The experiences of African American college students. *Journal of Negro Education*, 69(1/2), 60-73

sexuality, and other forms of identity, do not work independently but interact to produce particularized forms of social oppression."[27] Relationships are one of the most fundamental and critical connections that human beings have with one another. The goals of behavioral counseling and mentoring are to mitigate the negative impact of trauma that so many African American youths experience and restore a positive sense of self to those who are fortunate enough to benefit from these interactions.

A second implication to critical race theory is privilege. In CRT, the person who is not a member of an "oppressed" group of people is necessarily privileged.[28] A "privileged"person enjoys benefits of being in the dominant group, such as social and economic opportunities historically not offered to those in oppressed groups.

[27] Solorzano, D., Ceja, M., & Yosso, T. (2000). Critical race theory, racial microaggressions, and campus racial climate: The experiences of African American college students. *Journal of Negro Education*, 69(1/2), 60-73

[28] Ibid


Counseling
Intersectionality
Black Male Adolescent
Criticial Race Theory
Mentorship

The themes of CRT and intersectionality can be described in the following ways: first, racism is a central, permanent, and "normal" part of US society.[29][30] [31]As Delgado and Stefancic state, "Because racism is an ingrained feature of our landscape, it looks ordinary and natural to persons in the culture."[32] Taylor asserts "assumptions of White superiority are so ingrained in political, legal, and educational structures that they are almost unrecognizable and because it is all-encompassing and omnipresent, it cannot be easily recognized by its beneficiaries."[33] Ironically, the result is that whites cannot see it. Cornel West traces the emergence of "the idea of white supremacy within the modern discourse in the West …. it is important to note that the idea of white supremacy not only was accepted by prominent Enlightenment figures such as Montesquieu, Voltaire, Jefferson, and Hume, but, more important, it was accepted by them without their having to put forward their own arguments to justify it."[34]

This often results in many white people living in a world in which they benefit from

[29] Ibid

[30] Dixon, S. V., Graber, J. A., & Brooks-Gunn, J. (2008). The roles of respect for parental authority and parenting practices in parent-child conflict among African American, Latino, and European American families. *Journal of Family Psychology*, 22(1),

[31] Delgado, R. (1995). *The Rodrigo Chronicles: Conversations about America and Race*. New York: New York UP

[32] Delgado, R. and Stefancic, J. (2003) (Eds.) *Critical Race Theory: The Cutting Edge. 2nd ed*. Philadelphia: Temple

[33] Taylor, Edward. "A Critical Race Analysis of the Achievement Gap in the United States: Politics, Reality, and Hope." Leadership and Policy in Schools 5.1 (2006): 71 – 87.

[34] West, Cornell, "A Genealogy of Modern Racism" Race Critical Theories, Blackwell, 2002

and quickly dismiss all the privileges that go along with whiteness.[35] Derrick Bell asserts, "racism lies at the center, not the periphery; in the permanent, not in the fleeting; in the real lives of people of color and white people."[36] There is a premise that experiential knowledge is critical in the gathering of information. The dominant society often does not acknowledge the racial realities of people of color that are often dismissed as "myths". CRT also challenges the benign claims that of race neutrality, equal opportunity, objectivity, and color blindness.[37] The central premise of CRT that it examines and validates the lived experiences of discrimination and marginalization of African Americans within the historical context of the United States.

Post Traumatic Growth Techniques

A counseling strategy for addressing racialized trauma when working with African American males in counseling is the use of Post Traumatic Growth (PTG). PTG is defined as an individual's experience of positive change and resiliency following a traumatic life event which can result from experiencing Post Traumatic Stress Disorder – PTSD.[38] However, through PTG counseling individuals can cope with the trauma through identifying significance or purpose in the traumatic event. Some argue that PTG is a behavior management style, while others believe that PTG is the result of successful coping after a traumatic and stressful

[35] Ibid

[36] Bell, Derrick Faces at the Bottom of the Well. New York: Basic Book, 1992

[37] Solorzano, D., Ceja, M., & Yosso, T. (2000). Critical race theory, racial microaggressions, and campus racial climate: The experiences of African American college students. *Journal of Negro Education*, 69(1/2), 60-73

[38] Joseph, S., Murphy, D., & Regel, S. (2012). An affective-cognitive processing model of post traumatic growth. *Clinical Psychology and Psychotherapy,* 19, 316-325. 2012

event.[39] Sheikh found that individuals who reported PTG demonstrated self-efficacy and an internal locus of control.[40]

African American males are continually exposed to racial discrimination that is both overt and subtle that leads to verbal, behavioral, and environmental indignities that communicate hostility or negativity because of their race.[41] The accumulation of these aggressions can cause feelings of isolation, loss of control, emotional detachment, intrusive rumination, and a decrease in learning and health outcomes. Thus, PTG strategies are an ideal tool to incorporate into the provision of counseling services as they focus on the individual experience while acknowledging environmental conditions that reinforced the traumatic event.[42]

According to Joseph et al., positive outcomes of PTG can include: a) a greater sense of compassion and value towards others; b) enhanced personal relationships and, c) an overall appreciation of life including an emphasis on resiliency.[43] Additionally, individuals who reported experiencing PTG stated that they had higher levels of autonomy, a greater mastery over their environment, more positive relationships, an openness to growth, greater self-acceptance, and the belief that they have found their purpose in life.

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[39] Ibid

[40] Sheikh, A. (2007) Posttraumatic growth in trauma survivors: Implications for practice. *Counseling Psychology Quarterly, 21, 85-97.*

[41] Clyde, F. (1992). Surviving the institutional decimation of Black males: Causes, consequences, and intervention. In H. Brod (Ed.), *The making of masculinities: The new men's studies* (4th ed., pp.155–170). New York: Routledge.

[42] Ibid

[43] Joseph, S., Murphy, D., & Regel, S. (2012). An affective-cognitive processing model of post traumatic growth. *Clinical Psychology and Psychotherapy,* 19, 316-325. 2012

The promotion of Post-Traumatic Growth among African American males will require a combination of cultural competence and the implementation of methods often associated with the treatment of trauma survivors. "Education on cultural competence needs to include not only self-awareness, knowledge of cultural traditions, and skills for culturally appropriate interventions, but also an understanding of power, privilege and racial oppression."[44]

The Impact of Faith, Spirituality and Mental Health

Another cultural theme in the African American culture is the influence of religion and spirituality on wellbeing.[45] Religiosity and/or spirituality may be an important predictive factor for PTG Religious commitment, participating in religious activities, participation in meditative prayer, openness to change, and a willingness to examine challenging questions associated with spirituality has been positively linked with PTG. The practice of faith provides a network of social support, explanations for negative events, and guidelines for coping with suffering.[46] While religious coping has been found to produce positive outcomes such as acceptance, hope, satisfaction with one's life, and stress-related growth it appears the type of religious coping plays a role in determining the degree of PTG an individual may achieve.[47]

Overall, positive religious coping (including seeking spiritual support, belief in a

[44] Ibid

[45] Frazier, R. E., & Hansen, N. D. (2009). Religious/spiritual psychotherapy behaviors: Do we do what we believe to be important? Professional Psychology: *Research and Practice*, 40(1), 81–87. doi:10.1037/a0011671

[46] Ibid

[47] Mattis, J. (2002). African American women's definition of spirituality and religiosity. *Journal of Black Psychology*, 26 (1), 101–122. doi:10.1177/0095798400026001006

benevolent Deity, and religious forgiveness) was associated with PTG, whereas negative religious coping (including belief in an angry or punitive Deity, blaming a Deity, and spiritual discontent) was more predictive of posttraumatic stress disorder (PTSD).[48] The correlation between negative religious coping and PTSD can potentially be explained because a survivor of trauma may not only have to restructure worldviews shattered by the traumatic event but may also be forced to deal with a newfound questioning of God. This trauma may lead to measurable growth as individuals are forced to question previous held assumptions about religion and spirituality to form a new belief system.[49]

Black males remain one of the most underserved populations in the mental health field. A contributing factor to this disparity is the lack of African American counselors and therapists. Strategies should also include family, friends, neighbors, coworkers, clergy, and others. The color of someone's skin does not determine their level of effectiveness or empathy as a therapist. However, based on my 30+ years of experience, if you walk into a therapist's office and see that they are also African American, there is an implicit feeling of having a connection because you both have had more of a similar experience as a Black person in white America. Having people of color work with this population, especially young Black youth, is important. Not only do they need to see positive images of Blacks in their communities, but they also need to feel understood by someone who is helping them as they face adversities that are race related.

[48] Triplet, K.N., Tedeschi, R.G., Cann, A., Calhoun, L.G., & Reeve, C.L. (2004). Posttraumatic growth, meaning in life, and life satisfaction in response to trauma. *Psychological Trauma, Research, Practice, and Policy*, 4(4), 400-410. Doi: 10.1037/a0024204

[49] Shaw, A., Joseph, S., & Linley, P., (2005). Religion, spirituality and posttraumatic growth: A systemic review. Mental Health, Religion &Culture, 8(1), doi: 10.1080/13674670032000157981

In therapeutic practice, counselors can incorporate religion and spirituality when appropriate. In instances of race-based trauma, counselors can work with their clients in exploring the client's worldview including values, biases, and paradoxes. Questions that explore the client's personal philosophies of life, meaning and purpose can propel discussions of race to assist the counselor in learning more about the client's identity. A focus on spirituality and religion can lead to the identification of social supports, inspiration, and a sense of purpose. Interestingly, clients who placed a greater emphasis on religion and spirituality were more likely to experience PTG by forgiving an offender.[50]

Religion and Gender

For many years, the church was the one of the only places where Black people, particularly African American men, could find agency. Discrimination and racism severely limited the occupational opportunities of Black Americans. Our churches became our spiritual and vocational homes. They represented many positive qualities and were places where one could find safety, compassion and understanding. Church was a place where a person with leadership and aspirational goals could establish a foundation, seek guidance and support. However, they were also prone to the same norms that operated within the homes and cultural norms of the congregants and society at large who viewed men as being in charge and women in subservient roles.

The Black church has historically been a safe haven for the African American

[50] Schultz, J. M., Tallman, B.A. & Altmaier, E. M. (2012). Pathways to posttraumatic growth: The contributions of forgiveness and importance of religion and spirituality. *Psychology of Religion and Spirituality, 2(2*), 104-114. Doi: 10.1037/a00184542010).

community. It has not only met our spiritual needs and kept our faith; it has been a place where males have been able to craft careers far beyond what was available in society at large.[51] African American preachers have been at the forefront of the civil and human rights movement.[52] However, there is also an irony that the church has also reinforced much of the same discrimination present in society against women and those within the LBGTQ+ community as the outside world.[53]

The Christian Church is a hierarchy set forth in antiquity, custom and culture.[54] It was designed this way to parallel the dominant roles in society. Biblical patriarchy, also known as Christian patriarchy, is a patriarchal social system and set of theological tenets concerning gender relations and their manifestations in institutions, including marriage, the family, and the home.[55] It sees the father as the head of the home, responsible for the conduct of his family and is based on the following agreements. God reveals Himself as masculine, not feminine. God ordained distinct gender roles for man and woman as part of the created order. A husband and father are the head of his household, a family leader, provider, and protector. Male leadership in the home carries over into the church: for the most part men are permitted to hold ruling positions in the church. A God-honoring society will likewise prefer male leadership in civil and

[51] Lincoln, C. E., & Mamiya, L. H. (1990). *The black church in the African American experience.* Durham, NC: Duke University Press

[52] Braga, A. A., Hureau, D., & Winship, C. (2008). Losing faith, police, black churches, and the resurgence of youth violence in Boston. *Ohio State Journal of Criminal Law*, 6, 141–171.

[53] Adedoyin, A. C. A., & Salter, S. N. (2013). Mainstreaming black churches into suicide prevention among adolescents: A literature review. *Ethnicity and Inequalities in Health and Social Care*, 6(2/3), 43–53.

[54] Ibid

[55] Editorial, The Tenets of Biblical Patriarchy, 2010

other spheres.[56]

Critical Race Theory and Religion.

Recently in a November 30, 2020, statement, Southern Baptist Convention (SBC) seminary presidents have taken up a hot culture war issue in a recent statement, saying "critical race theory" is incompatible with the denomination's central statement of faith. The six presidents of SBC seminaries called critical race theory "unbiblical" and instead emphasized the need to turn to Christian teachings alone, not secular ideas, to confront racism. Issued on the 20th anniversary of the adoption of the Southern Baptist Convention's most recent statement of faith, the Baptist Faith & Message, the presidents' statement takes aim at the race-based theory that is opposed by many conservatives that call themselves Christians. "We stand together on historic Southern Baptist condemnations of racism in any form, and we also declare that affirmation of Critical Race Theory, Intersectionality, and any version of Critical Theory is incompatible with the Baptist Faith & Message," They did not offer a description of critical race theory or explain how it clashes with the core beliefs of Southern Baptists, the nation's largest Protestant body with 14.5 million members.

"The SBC is a denomination haunted by white supremacy and, ironically, the only system it doesn't want its people engaging with at all is a social science theory that specifically addresses its heritage, which is systemic racism," said Kyle J. Howard, a racial and spiritual trauma counselor. "It's deeply revealing. No matter how many times they say they are against racism, they continually move in ways that suggest its' true in word, not in deed." Howard is a

[56] Ibid

Black alumnus of Boyce College, the undergraduate arm of the Southern Baptist Theological Seminary in Louisville, Kentucky. He studied toward a master's degree there too but has since left the Southern Baptist convention. The seminary presidents' statement comes at a time when Southern Baptists are trying to attract more African Americans and start more Black churches. In the summer of 2021, one of them, led by Black pastor John Onwuchekwa of Atlanta, left the denomination. "The convention was one bad marketing meeting away from being the "Confederate Baptist Convention," Onwuchekwa told The Washington Post. Jemar Tisby, author of *The Color of Compromise: The Truth About the American Church's Complicity in Racism*, said such statements make it unlikely that the SBC's attempts to attract more Black churchgoers will succeed.

A word from Scripture

In Isaiah 40:28 – 31, his words give us clarity, hope and a reason to keep the faith knowing that ultimately God cares, knows everything about us; is patient and sees us for who we truly are. The New International Version puts it this way, "Do you not know? Have you not heard? The LORD is the everlasting God, the Creator of the ends of the earth. He will not grow tired or weary, and his understanding no one can fathom. He gives strength to the weary and increases the power of the weak. Even youths grow tired and weary, and young men stumble and fall; but those who hope in the LORD will renew their strength. They will soar on wings like eagles; they will run and not grow weary; they will walk and not be faint." Here is the Passion translation, "Don't you know? Haven't you been listening? Yahweh is the one and only everlasting God, the Creator of all you can see and imagine! He never gets weary or worn out. His intelligence is unlimited; he is never puzzled over what to do! He empowers the feeble and

infuses the powerless with increasing strength. Even young people faint and get exhausted; athletic ones may stumble and fall. But those who wait for Yahweh's grace will experience divine strength. They will rise up on soaring wings and fly like eagles, run their race without growing weary, and walk-through life without giving up." There is no better place then scripture for inspiration drawn from faith and understanding the history and lived experience of our community.

The Lord us gives us strength and insight about the Holy Spirit's ability to help or care when we are in a great crisis. Isaiah's words were addressed to his people as a reminder that they had been redeemed by his grace. The Lord points us away from the crisis and doubt to facts about him. "Have you not known? Have you not heard? The Lord is the everlasting God, the Creator of the ends of the earth. He (God) does not faint or grow weary; the Lord's understanding is unsearchable."

The world had a beginning as it was once nothing. God spoke the world into being, and instantly it was so. I we believe this; we can see that it would take much less power to relieve us in whatever crisis we are in than it did to create or maintain the world. God is certainly able and cares for us.

God allows us to know that his understanding is infinite and unsearchable. We may not understand why we are in dire straits, but God does and gives us a great promise (to have peace with him), and he has provided it freely through the example of Christ. When we seek relief in present troubles, we should always remember former mercies and how far we have come.

The Importance of the Counter-story

Counter-stories are a tool used by marginalized communities to tell stories that reflect their experiences, knowledge – and durability. They challenge the traditional stories, narratives and misrepresentations that are too often accepted and imposed on oppressed communities. Experiential knowledge, the understanding or the counter-story is the methodology that can chronical the lived experiences of the youth and families. Utilizing this practice can expose, analyze, and challenge the negative stereotypes about African American youth that are commonly accepted as the norm.

We are inundated with statistics and the corresponding images of young black men. Bryan Stevenson, lawyer, activist, and founder of the Equal Justice Initiative, the nonprofit organization behind National Memorial for Peace and Justice, states, "This country is very different today than it was 40 years ago. In 1972, there were 300,000 people in jails and prisons. Today, there are 2.3 million. The United States now has the highest rate of incarceration in the world. We have seven million people on probation and parole. And mass incarceration, in my judgment, has fundamentally changed our world. In poor communities, in communities of color, there is this despair, there is this hopelessness that is being shaped by these outcomes. One out of three Black men between the ages of 18 and 30 is in jail, in prison, on probation or parole. In urban communities across this country -- Los Angeles, Philadelphia, Baltimore, Washington -- 50 to 60 percent of all young men of color are in jail or prison or on probation or parole." [57]

There are multiple stories must be remembered because they give historical context to the lived experience of African Americans. They are now part of a long, painful lineage of what has

[57] My Brother's Keeper Alliance-Obama Foundation, https://www.obama.org/mbka

happened to far too many African Americans because of this country's history of police brutality and violent racism. Robert Jones Jr. in *The Prophets*, describes it this way, **"**That was the way of the world as remade…and the list of grievances was long: They pushed people into the mud and then called them filthy. They forbade people from accessing any knowledge of the world and then called them simple. They worked people until their empty hands were twisted, bleeding and could do no more, then called them lazy. They forced people to eat innards from troughs and then called them uncivilized. They kidnapped babies and shattered families and then called them incapable of love. The raped and lynched and cut up people into parts, and then called the pieces savage. They stepped on people's throats with all their might and asked why the people could not breathe. And then when, when people try to break the foot, or cut if off one, they screamed "CHAOS!" a claimed that mass murder was the only way to restore order."[58]

In all, it is crucial to use theory and methodology that counters a system that seeks to dismiss or decenter racism and those whose lives are daily affected by it. The counter-story, then, is a method of telling accounts of those people whose experiences are not often told. Informed by Critical Race Theory, this methodology serves to expose, analyze, and challenge majoritarian stories of racialized privilege and can help to strengthen traditions of social, political, and cultural survival and resistance.[59]

I view the changes that are needed to support and assist male youth as a combination of being process oriented and systemic. More resources are now being devoted to mental health

[58] Jones, R. *The Prophets.* G.P. Putnam's Sons. 2021.

[59] Chavous, T. M., Rivas, D., Smalls, C., Griffin, T., & Cogburn, C. Gender matters, too: The influences of school racial discrimination and racial identity on academic engagement outcomes among African American adolescents. *Developmental Psychology*, 44, 637-654. doi:10.1037/0012-1649.44.3.637. 2008

which is currently described as behavioral and cognitive support. Using this description often removes the stigma that was once attached to receiving counseling. In addition, many support services and resources are now at no cost to families. The availability of programs has also increased. Mental health care is now more accessible through school systems being a major referral source. There are also linkages through mental health providers and care management organizations. New Life Counseling Center is identified as one of these agencies. Still, there will continue to be a need for education, outreach, and ongoing awareness of the importance of mental and behavioral health for there to be a significant impact.

The outcomes from my agency's impact on youth and families are based on our therapeutic engagement with them. We are community based and work in the homes of the youth and families we serve. I think this makes a difference because we try to be positive role models within the context of what our families already know. In other words, we walk the same streets that they do. There is a term in Spanish *acompanamiento*: which is mentoring that is more than spending time with others and being empathetic, but making space, creating place, and building community. Hopefully, with this type of relationship, the youth can see that positive outcomes are possible for them creating the highest probability of successfully achieving the behavioral goals that are established in collaboration with the youth.

Despite the challenges that Coronavirus has created, I am optimistic that our resources will be sufficient to accomplish the goal that I have set out to achieve. My professional life revolves around the children, youth, and the community that I work in. However, there are areas that I will have to learn to draw on more to be more effective. The cross section of religion, gender and Critical Race Theory are a central tenet of my counseling philosophy because of their

impact on the behavior and performance of Black male adolescents. The exhaustion and pain these circumstances place on young Black males cannot be overlooked.

I have learned in counseling young males throughout the years, that they implicitly ask three questions that will make or break authentic relationships. While our youth are not looking for a father or "father figure or replacement, they are seeking guidance in examples of males that they can learn from. My role as a therapist with male adolescents encompasses many levels in multiple roles. Sometimes it is that of an educator helping my youth to understand their history. Sometimes as a mentor and role model grooming them. And always as a resource of encouragement to be strong, resilient and successful.

Therein lies the power and influence of counseling, mentoring, and role modeling. The following are stories that illustrate these questions.

I remember riding an uptown train in Manhattan, watching the vivid transformation of a young Black man. He had most likely just gotten off from work. As we rode north from midtown, he took off his tie and adorned his head in a black do rag. This small action completely changed his appearance. I wondered if it was for leisure, safety, or comfort. Was it to keep his waves in place or because it was the uniform of his neighborhood? Would the people he worked with now recognize him or would he now be seen as a thug?

I know a young Black male university professor who on the first day of the classes, sits in the back waiting for his students to arrive observing their interactions and gauging whether they see and recognize him at the course professor. At the appropriate time when the class is full, he walks to the front claiming his authority by introducing himself to his students. Question one: The young male askes, "Can You See Me?"

Many years ago, I worked with youth at a group home in Brooklyn, NY. I also worked in the Upward Bound Program at Seton Hall University in South Orange, NJ. Idealistically, I planned for my Brooklyn youth to come to the pre-college program on a Saturday morning. I got consent from the directors of both programs. All the young people had to do was meet me at 7am on the NY side of the World Trade Center and I would chaperone them from there. I will always remember them showing up early that Saturday morning and how they anxiously navigated these unfamiliar surroundings, willing to go to a place they had never been before. The mini-student exchange day went off without a hitch. Question two: The young male askes, "Can You Hear Me?"

The Brooklyn youth were paired with the Upward Bound students who acted as their chaperones. They are all grown up now most probably with children of their own who are now the same age as they were when this event took place. I hope that this experience changed their lives for the better. Question three: The young male askes, "Can I Trust You?"

You may wonder what all these stories have in common. My answer is that the work of a counselor relies on insight and the ability to recognize the goodness and potential that God has placed in each of us despite our circumstances, wherever we are or whatever we look like.

It seemed like an ordinary summer day in early July, the weather was expected to be sunny with no rain in the forecast. I planned this event for several weeks hoping that it would come to fruition. I had contacted my friend in Upstate NY, whom I had known for over twenty years since placing two little girls with her whom she adopted. I wanted to bring two young men that I counseled to her home to spend the day. The plan was that we would use the pool in her complex and then have a cookout. I prepared the young men by explaining my plan and introducing them to one another. The conversation would be light, not discussing anything heavy

or confidential. As we drove up to her home the day appeared promising. As their therapist, I had also taken on the role of mentor and wanted to get them out of the city for a day. When we drove into the complex, we passed a waterfall on the left. One of the youths remarked, "Do Black people live here?" The boys got along surprisingly well; we spent a lot of time in the pool. One was originally from the Caribbean and knew how to swim. I taught the other how to float on the water. After that, she cooked us hot dogs and hamburgers. The day ended as pleasantly as it began.

I often think of this day with these two adolescent Black males who have long since gone their separate ways. I hope that they remember this day as fondly as I do.

There has been a growing recognition of the importance of mentoring African American males. Some traditional organizations have been around for years like Big Brothers, Big Sisters and 100 Black Men. President Obama has also started an initiative called My Brother's Keeper to address this issue. Our agency builds on this legacy by adding a clinical component using licensed therapists in this capacity. We hope to take this process to the next level of proactively engaging our youth through our relationships with them and the exposure that we can provide. What I have learned in this process is that true mentoring and counseling is collaborative as I have gained as much from the youth that I served as I have hopefully given to them.

While this seems like a simple task it takes vision, empathy, and compassion to accomplish this goal. Robert Jones, Jr expresses a similar sentiment in *The Prophets*, "It ain't no use. No use in hollering at folks who won't hear you. No use in crying in front of folks who can't

feel your pain.[60] They who use your suffering as a measuring stick for how much they gone build on top of it . . . Can you feel me?"

[60] Jones, R. (2021). *The Prophets.* G.P. Putnam's Sons.

CHAPTER 3: PLAN OF IMPLEMENTATION

The following are the steps and areas of focus that I sought to examine in my demonstration project.

1. Justification of the need/Why African American males are important for African American youth.
2. Outline and scope of the project.
3. Identification and recruitment of stakeholders.
4. Application of scripture and theory.
5. Conducting the research using surveys, interviews and focus groups.
6. Summary of findings.
7. Recommendations.

Identification and recruitment of stakeholders

The third component of my research demonstration project on the positive impact of Black male therapists with African American male adolescents. I initially identified three primary stakeholders within this cohort. The first group of stakeholders that I surveyed and met with were the parents and caregivers of the adolescent African American males within our agency. The second group was the youth themselves, who were interviewed individually. The third group of stakeholders is our agency staff. This expanded to a fourth group which included community providers.

While I acknowledge that I have a distinct perspective; the purpose of my demonstration

project is to assess the attitudes and beliefs of our constituent stakeholders to ultimately improve the mental and behavioral health outcomes of African American male adolescents. What I found reinforced much of what I already suspected, but also added valuable insights. In many instances, the youth and their parents could not have been farther apart in the way they viewed the same issue. It is at this point that I began to consider the reasons why this happens and how this occurs.

Youth Demographics and Family Background

Fourteen adolescents were identified within our program who met the initial criteria. However, there were several that were not able to participate. One youth is severely cognitively impaired, another is moderately autistic, a third is incarcerated. Thus, of the original 14 youths identified only 11 were able to participate in this demonstration project. The 11 adolescent Black males ranged in age from 13-17. Of the 11 youths surveyed; one comes from a two-parent home. Two youths are in resource (foster) homes and two have fathers actively present in their lives.

This demonstration project utilized surveys for both the youth and parent/caregiver. The surveys provided a foundation to treatment plans and goals that was generated based on participant responses and the insights provided in each individual encounter, coupled with the parent/caregiver responses. Our staff are the third group of stakeholders, they were assessed to gather information to understand their perspectives on the issue of the importance of the Black Male in the counseling experience. This information was then integrated to inform, guide and influence our agency's ethos and practices creating a caring therapeutic community geared towards African American male youth. One of the initiatives that I put in place immediately was increasing the number of tutors and mentors for our youth. I am hopeful that matching of these

young men who are skilled and accomplished with our male adolescents will have a lasting impact beyond their specific assigned roles. As I began to conduct and collect the adolescent surveys, I was impressed with each youth's unique circumstances and perspective and the information that was shared by their therapist. What I planned theoretically, began to take on shape and became a living document as I heard each individual youth's story. I expected to see consistencies with what I expected and learn from what each youth was willing to share. However, what was found was profoundly unique for each adolescent and related to the dynamic of being an African American male in surprising and unexpected ways. The therapist who has the most adolescents detailed several youths and their challenges. One of his cases is with a 17 - year-old that is profoundly autistic and non-verbal. He is not toilet trained and functions at the level of an infant, so taking the survey was not appropriate for him. However, the larger question became how to engage him. Fortunately, this therapist is very innovative, he was able to describe the various activities he used for him, with the goal of the youth being socially engaged. He would paint with the youth, play classical music, dance, and exercise with him. Ironically, his father terminated services saying his decision was due to safety concerns due to covid-19. However, the therapist also felt that there were other circumstances involved that involved patriarchy and culture. The family is Haitian American, while the youth's mother was supportive, the father had issues that were territorial and was not. The therapist felt that he did not want another (professional) male working with his son.

A second youth was identified who is 16 years old, psychotic, and heavily medicated. Again, the questions of the appropriateness of the questionnaire and how-to best counsel this young person were presented. The therapist responded that the questionnaire became an

assessment tool to utilize with the adolescent who goes between manic episodes and hallucinations. Listening to these stories left me impressed with the skill and dexterity of this therapist and how he did not let what many would consider insurmountable obstacles stand in the way of connecting with each of individuals. He leaned into them, and their circumstances willing to join them where they were and willing to use unconventional methods that connected with them. This both shattered some of my original superficial premises about the efficacy of Black Males and our ability to be intentional within our community and reinforced the importance of our impact based on our experience and training.

Use of technology

In the process of enacting this demonstration project society was confronted with a global pandemic. As such, Covid-19 has presented untold personal and professional challenges with completing this project. One of the most significant is our agency's immediate conversion to telehealth counseling. This literally had to happen within a two-week time span with no prior training and very little guidance. Our entire practice went on-line within this time span and is a system that we continue to learn as it evolves. Our hope is that we continue to engage in help children problem solve and create new behavioral outcomes. The format we work with is based on agency and parent referrals, grounded in the ethos of "family choice and family voice." We meet weekly with families and care managers regarding the status of behavioral goals. Progress notes and treatment plans are used to assess the level of personal satisfaction of youth and their families.

Privacy and Confidentiality

There are not any foreseen conflicts between the site team and target group as they do not

come in direct contact with one another. Additionally, confidentiality is threaded throughout our organizational ethos despite our deep and extensive involvement in the community. We are considerate and respectful of privacy. Our practices adhere to all Health Insurance Portability and Accountability Act (HIPAA) guidelines.

Mindful to protect the privacy and confidentiality of youths and their families. The Site Team has supported a system that allows for advisement without having to divulge personal information of clients. This was helpful to me because I was able to draw from them and I learned that this process should not be done alone, but in the company of my support group.

I am reminded of numerous stories in the Bible that reinforce this message. Moses was given counsel by his father-in-law Jethro, who reminded him that he was not alone in his calling to lead his people to the promised land. The disciples were Jesus twelve companions who were instrumental in spreading his teachings of the good news and Paul entrusted Timothy with his goal of teaching new followers of Christ. “Two are better than one, because they have a good return for their labor: If either of them falls down, one can help the other up. But pity anyone who falls and has no one to help them up. Also, if two lies down together, they will keep warm. But how can one keep warm alone? Though one may be overpowered, two can defend themselves. A cord of three strands is not quickly broken.” (Ecclesiastes 4:9-12). I have been reminded in my studies that leadership is a process of lifelong scholarship. Although I am primarily responsible for my work, my hope is that this is part of God’s plan for me and that I am not alone. I will continue to develop my working relationship with my Site Team whom I will rely on to give me guidance, motivation, resources, and insight.

Goals and Strategies

Goal 1 - Raising the awareness of youth and families of trauma related to African American males in urban settings.

Strategy 1 - A caregiver and youth conference for participants to discuss issues and concerns related to demonstration project.

Strategy 2 – Present surveys/pre-assessments to all stake holders – parents/caregivers and youth.

Strategy 3 – Conduct a series of workshops on the impact of trauma and Social and Emotional Learning (SEL) on youth development.

Evaluation of Goal 1 – A pre-test will be given to determine participants knowledge about the need to provide counseling/mentoring to African American male youth ages 13-17. Each youth was interviewed individually rather than pre-tested.

Goal 2 – Draw from my site team to assist in developing the Demonstration Project.

Strategy 1 – Identify the skills sets needed for the team members.

Strategy 2 – Team building exercise/ vision casting exercise.

Strategy 3 – Develop a program outline.

Evaluation of Goal 2 – 75% of team members will continue to work with the initiative as counselors/mentors. This goal was accomplished 100%.

Goal 3 - Development of the solution

Strategy 1 - Identify 3 counseling/mentoring programs to study. (formal vs. informal counseling/mentoring. Use of licensed/skilled professionals.)

Strategy 2 - Compare and contrast their goals

Strategy 3 – Survey youth about what they would like to see in a counseling/mentoring program.

Evaluation of Goal 3 - A post-test will be administered, and the results will be analyzed to evaluate participant's knowledge. At least 70% of participants will complete the post-test. At least 70% of participants reported a positive response from the demonstration project. The format was changed to an interview that assessed the youth's level of performance and attitude to counseling. That information was gathered and populated in the analysis and effectiveness of the counseling program.

This demonstration project focused on 11 adolescent Black males who were identified as in need of mental and behavioral health development. In a perfect world, I would have planned the youth engagement activity in much the same way as the parent support group. Youth would have received a questionnaire and then participated in three support groups. Instead, after discussions with my team and our therapists, I decided to follow their recommendations to meet and interview them separately. This was based on factors which I understood, but had minimized, causing me to acknowledge that what I planned - looked very good in theory, but was not a realistic plan of action. As I laid out this plan to the therapist who has most of the cases, he asked if he could be transparent. He then went on to describe in detail, the obstacles in planning groups with the youth we are working with.

The challenges were multi-layered. First, he felt there would be difficulties with technology. as the sessions would be online due to covid-19. Secondly, he did not think that they would log in nor be motivated to participate since they were used to individual encounters. Third, there would be consequences around disclosure and the youth's comfort level with verbal

participation. My plan to address these issues was to make the groups primarily listening sessions that were psychoeducational.

Initially the plan was to have the youth participate by calling in to the Zoom meeting as their parents did. However, the example the therapist used, who is quite experienced with his youth was that it would be like a “a deer caught in head lights.” for them. He felt that they did not have the social or communication acumen to participate in a group context with other adolescents with whom they were unfamiliar, not knowing if they had or wanted to share similar issues. His recommendation was to utilize his already established relationship with the youth to gain access to the information that is being sought.

I also discussed this with one of my site team members who shared similar sentiments about confidentiality and the ability level of the youth we work with. Despite the possibility of using a release of information document with respect to confidentiality, these adolescents have been identified for intensive counseling because of the severity of their behavior. Ethically, protecting their individual identity is paramount, so there was need to capture specific classifying information. While the stories they shared would be real, there would be no use of names to protect the identity and privacy of our youth and families. Many also have cognitive and social deficits that would deserve respect and consideration. I had a third conversation with a client who is seen in therapy that works with adjudicated youth at the Essex County Detention Center. His prospective was similar. While the facility is closed because of covid-19, it remains open for the most serious offenders. The remaining youth are remanded to their homes. The instruction they receive is virtual. His job is to prepare instructional modules that are sent to students who are home bound. They complete the assignments and submit them to their teachers. He is also on a committee to incorporate social and emotional learning (SEL) into instruction.

Unfortunately, he said that there is little real academic interaction and engagement in the process. He used the term "mission based" several times while explaining this process, meaning that they were trying to design scholastic instruction for the students that would achieve the educational goals of the institution. This position was similar to what our therapist was questioning, which is essentially: "What are you looking to achieve within the context of our agency, and what is the most efficacious way of achieving this goal?" As I thought more deeply about the proposed groups, I realized that my focus was the audience I was writing for, the reader that I was writing to, and myself as the author, but not the youth for whom I'm trying to reach. What I became reacquainted with was nature of the work of counseling and that it is essentially – a long game that will hopefully net benefits long after the work is done. I recently received a call from one of our therapists who has moved his family to Gambia, Africa, to start a community school. He shared the following text with me from one of his former counselees.

"I somehow throughout these years found your number and I just wanted to say thank you being a major influencer in my life I wish I was old and smart enough to understand all the knowledge you had gave me you went out your way to show me a different environment and took me out to places I never been before that's something I never forgot and I just wanted to tell you thank you sir for everything I'm 19 years old now and my birthdays coming up soon hopefully I'll make it and blessing from my soul my brother I wish you nothing but success through your travels 💝"

Adverse Childhood Experiences

Dr. Nadine Burke Harris calls childhood trauma, "the bad memories, that no one talks

about . . . just drama, baggage."[61] Harris characterizes the lasting and long-term effects of adverse childhood experiences and offers a set of tools, based in science, which can help each of us heal ourselves, our children, and our world. One of the tools she uses is the Adverse Childhood Experiences – ACE assessment, which is a determiner of how adverse childhood experiences can have a life-long impact.[62] The original study was done by Dr. Vince Felitti at Kaiser and Dr. Bob Anda at the CDC, and together, they asked 17,500 adults about their history of exposure to what they called "adverse childhood experiences," or ACEs. Those include physical, emotional, or sexual abuse; physical or emotional neglect; parental mental illness, substance dependence, incarceration; parental separation or divorce; or domestic violence. For every yes, you would get a point on your ACE score. And then what they did was they correlated these ACE scores against health outcomes. What they found was striking. Two things: Number one, ACEs are incredibly common. Sixty-seven percent of the population had at least one ACE, and 12.6 percent, one in eight, had four or more ACEs. The second thing that they found was that there was a dose-response relationship between ACEs and health outcomes: the higher your ACE score, the worse your health outcomes. For a person with an ACE score of four or more, their relative risk of chronic obstructive pulmonary disease was two and a half times that of someone with an ACE score of zero. For hepatitis, it was also two and a half times. For depression, it was four and a half times. For suicidality, it was 12 times. A person with an ACE score of seven or more had triple the lifetime risk of lung cancer and three and a half times the risk of ischemic heart disease, the number one killer in the United States of America. She also detailed how

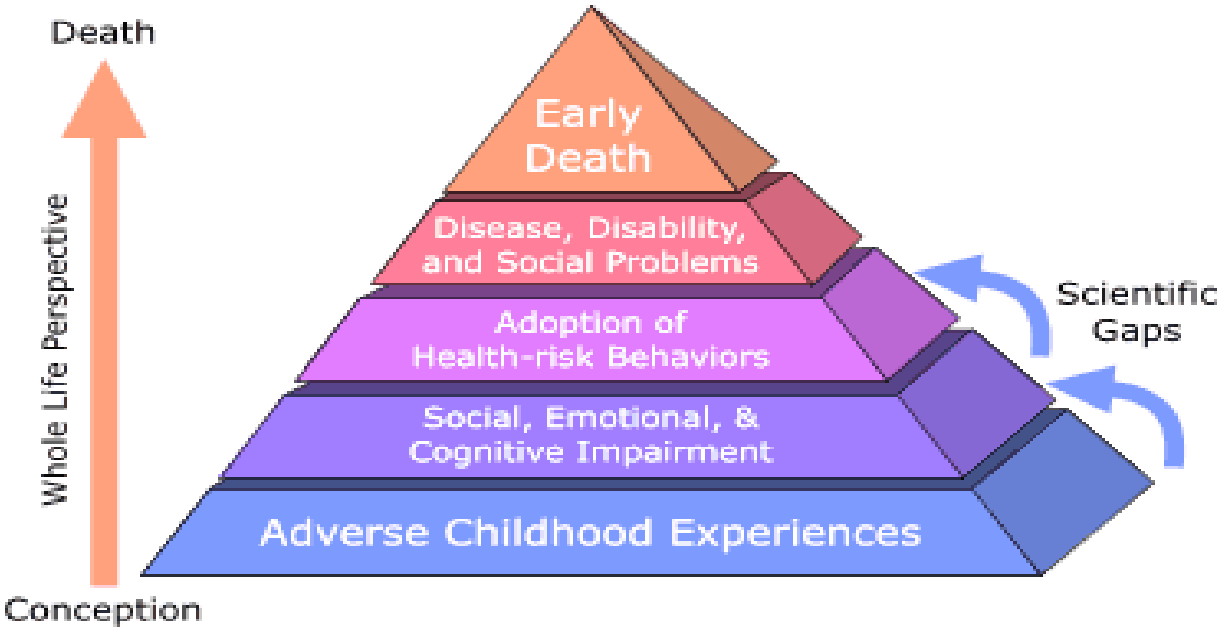
[61] Burke Harris, Nadine, A Hidden Crisis: Findings on Adverse Childhood Experiences in California Center for Youth Wellness, 2014

[62] Ibid

ACE's impact brain development. It affects areas like the nucleus acumens, the pleasure and reward center of the brain that is implicated in substance dependence. It inhibits the prefrontal cortex, which is necessary for impulse control and executive function, a critical area for learning. And on MRI scans, we see measurable differences in the amygdala, the brain's fear response center. So, there are real neurologic reasons why folks exposed to high doses of adversity are more likely to engage in high-risk behavior, and that is important to know.

The following diagram looks at these experiences and how they negatively impact physiological development and can lead to early death. The ACE Pyramid represents the conceptual framework for the ACE Study. The ACE Study has uncovered how ACEs are strongly related to development of risk factors for disease, and well-being throughout the life course.

Figure 3



Dr. Harris shares the highlights and the intersection of medical and mental health explaining her experience of treating children for ADHD, who in many instances had experienced severe

trauma.[63] The recommendation for best practices is to utilize a multi- disciplinary approach that incorporates homes visits, care coordination, mental health care, nutrition, holistic interventions, and medication when necessary.[64]

Based on these considerations, I decided the best way to get the most authentic results and information from the adolescent males we serve was to use the questionnaires in individual encounters with follow-ups based on the results and responses. I also thought about the importance of the relationships that had already been created between the therapists and the youth. The need for the establishment of trust in their existing relationship coupled with confidentiality was also a major factor. In my conversations, with my team, we discussed the difference between qualitative and quantitative research and why the former is most appropriate. The research methodology utilized in this project supports qualitative research because it emphasizes the experiences and stories of our youth and families.[65] The goal is to create a stronger more culturally relevant therapeutic support system. The use of quantitative data is supportive and supplemental where indicated. response center. So, there are real neurologic reasons why folks exposed to high doses of adversity are more likely to engage in high-risk behavior, and that is important to know.

Figure 3 looks at these experiences and how they negatively impact physiological development and can lead to early death. The ACE Pyramid represents the conceptual framework from the ACE Study. The ACE Study has uncovered how ACEs are strongly related

[63] Burke Harris, Nadine, A Hidden Crisis: Findings on Adverse Childhood Experiences in California Center for Youth Wellness, 2014

[64] Ibid

[65] Creswell, J. W. (2012). *Qualitative inquiry and research design: Choosing among five approaches.* Sage.

to development of risk factors for disease, and well-being throughout the life course.

The heart of my demonstration project is to highlight the importance of each youth's voice and give them the tools to tell their story in their own words. One aspect includes documenting their experiences, hopes, and dreams. Another includes terming how New Life Counseling and Mental Health can help them to achieve their goals. To that extent, I want to expose our adolescent males to as many positive role models as possible. Yet, I understand there are challenges to this due to covid-19. I am also reminded of Adam Clayton Powell, the first African American congressman who served the people of Harlem for 12 terms from 1933 to 1971, and Pastor of the Abyssinian Baptist from 1937 to 1971. Who asked an audience in Cambridge, MA, in 1967 – "What's in your hand?" Powell, an enigmatic and inspiring leader, is someone that remains synonymous and ingrained in Harlem, from the Adam Clayton Powell office building, a centerpiece of 125th St, to AdamClayton Powell Boulevard, formerly 7th Ave.[66] [67] In this famous address, he challenged the audience to be inspired when confronted with obstacles and challenges. He used the physical reference of their hands to show them that they had all that they needed to empower and strengthen them. His speech gave numerous examples from scripture andhistory of how people who were seemingly and exceedingly small overcame major challenges, the following is an excerpt his speech, What's in Your Hand?

A young slave boy stood one day before the greatest ruler of his day. And God said to

[66] Alexander, E. Curtis. Adam Clayton Powell, Jr.: A Black Power Political Educator. New York: ECA Associates, 1983.

[67] Hamilton, C. V. (1991). *Adam Clayton Powell, Jr.: The Political Biography of An American Dilemma*. New York: Atheneum, 1991

Moses, "What's in your hand?" And Moses said, "LORD, only I've got a stick, that's all." He said, "Well, let me use what's in your hand!" And God used that slave boy with a stick in his hand to divide the Red Sea, march through a wilderness, bring water out of rocks, manna from heaven, and bring his people to freedom land! What's in your hand? What's in your hand?! George Washington Carver! Who was so frail that he was traded for a broken-down horse as a slave boy and George Washington Carver sitting in the science laboratory at Tuskegee told me, he said, "Dr. Powell," he said, "I just go out into the fields each morning at 5 o'clock, and I let God guide me and I bring back these little things and work them with my laboratory."? And that man did more to revolutionize the agricultural science of peanuts, and of cotton, and sweet potatoes than any other human being in the field of agricultural science. What's in your hand? Just let God use you, that's all. What's in your hand?! "All I've got is a slingshot and the enemies of my people are great and big and more numerous than we are!" "Well, Little David, go down to the brook and pick out a few stonesand come on back, and close your eyes if you want to and pull back that slingshot and let it go!" And David killed the biggest enemy, the leader of the giants, against his people, and hispeople became free, just letting God guide a stone in his hand. And a few years passed, and David is a king. And God says, "What's in your hand?" He said, "I've got a harp in my hand." He said, "Well, David, play on your harp!" And he played, "The Lord is My Shepherd I shall not want. maketh me to lie down in green pastures...leadeth me beside still waters. Yea, though, I walk through the valley of the shadow of death, I'll fear no evil." What's in your hand? What's in your hand?! Man Hanging on a Cross?! "I've got two nails in my hands! Father! I stretch my hands to thee! No other help I know. If Thou withdraw thyself from me,whither shall I go?" And that man with two nails in his hand's split history in half: B.C. and A.D.! And what's in your hands

tonight, people of Cambridge? You've got GOD in your hand, and He'll let you win! Because He's on your side, and one with God is always in the majority. So, walk with Him and talk with Him, and work with Him, and stick together, and fight together! And with God's hand in your hand, the victory will be accomplished, here, sooner than you dreamed, sooner than you hoped, sooner than you prayed for, sooner than you imagined. Good night and God bless you.

Adam Clayton Powell, What's in Your Hand, 1967.

The Kingdom of God is at Hand

There is general agreement among biblical scholars that the term used by Jesus himself would have been "Kingdom of God." Matthew's use for the term the Kingdom of Heaven is generally seen as a parallel to the usage of Kingdom of God in Mark and Luke's gospels. The Kingdom of God, also called Kingdom of Heaven, in Christianity, the spiritual realm over which God reigns as King, or the fulfillment on Earth of God's will. The phrase occurs frequently in the New Testament, primarily used by Jesus Christ in the first threeGospels. I believe the phrase was meant to inspire us, understanding that we are representative of God's Kingdom which is near and within each of us.

One day when Jesus was asked by the Pharisees when the Kingdom of God would come, He answered: "The kingdom of God does not come with observation; nor will they say,'See here!' or 'See there!' For indeed, the kingdom of God is within you" (Luke 17:20-21,) From this passage some have mistakenly concluded that the Kingdom of God only exists in people's hearts or minds. While the Kingdom of God exists in heaven, I have come to believethat it also encompasses all peoples and nations here on earth. The Greek word entos, whichis translated "within" in this passage, can also be translated "in the midst of". Vine's CompleteExpository Dictionary of Old

and New Testament Words, explaining “Within”. The following are examples of this spiritual transformation inside of all of us can occur when we:

- Change your thinking about yourself and about God.
- Regard every thought of God as God.
- Practice believing that God dwells in you already.
- Remember that God dwells in all others, too.
- Be still and know that I am God.

We often feel as if we do not have all that we need, but faith teaches us differently. In (Jeremiah, 29:11, NIV) The scripture says, “For I know the plans I have for you,” declares the LORD, “plans to prosper you and not to harm you, plans to give you hope and a future. “If we have faith in where and all that God has placed us then we will have what we need when we need it.

This theme is a stirring theme because it represents the possibilities that are within our agency’s grasp. Our therapists, behavioral assistants, mentors, and tutors are what New Life Counseling currently has at hand, and what is available to us right now. Therefore, we will use what we each have at hand to teach, counsel, strengthen and empower our youth to build a better future for themselves and their communities. After weighing my decision, I was struck with the power and importance of our staff who are role models that work directly one on one with our young men and how consistent this is with the goal of my Challenge Statement.

In the pursuit of this work and settling into a different way of doing things, I realized that being online, does not mean that we must be detached or disconnected. We are still connected

and still live streaming to the youth and families that we serve because we have determined to find creative solutions to remain relevant. I also thought about the season of Advent and how it represents hope and expectation of new life with the birth of Jesus. Likewise, we will continue to find innovative ways to reach the youth and families we serve.

Advent's scripture passages call us to imagine a new world, not a return to normal. That every child represents God's vision for the world and how we might find the courage to imagine of possibilities and the permission to change our selves and the world for the better and not settle into old routines. I am reminded and inspired, that; "Joy comes when least expected. We rejoice only when life is turned on its ear: when whatever we feared, whatever we steeled ourselves against – some gift of God has presented itself instead.

When we rein in our love to protect ourselves from pian when we curtain our hopes from fear of disappointment when we equip ourselves with cynicism to avoid looking foolish, we do so at the expense of joy." We are called to be relevant and restorative, not in symbolic ways, but to be examples to our youth sharing the good news about what is possible for them. I believe that the Angela Davis expressed it best when she said, "Chase joy, while doing the work!"

The fundamental premise of staff and caregiver development within our agency occurs on several levels that share the same goals – which are taking responsibility, knowledge, information, and empowerment. Unlike traditional psychoanalysis that can take several years, our form of counseling is time limited. From the onset we seek to prepare our clients for the time that we will no longer be together - preparing them with the tools and strategies they will need to continue working toward their goals.

New Life Counseling operates from a transformative philosophy in that we instill

accountability in our staff and to the couples, youth, and families that we work with. In the practice of transformational leadership there is no subordination leaders and followers. It is a process the changes and transforms people. Bass and Riggio suggest that this form of leadership is built on intrinsic motivation and participant development where those within the organization accomplish more than what is expected of them because of the influence of the organization's style of leadership.[68] We believe that leadership is essentially the core of professional development in that it encompasses the ability of an individual or organization to "lead" or guide other individuals, teams, or entire organizations. Leadership is the art of motivating a group of people to act toward achieving a common goal.

In a business setting, this can mean directing workers and colleagues with a strategy to meet the company's needs. This characterization of leadership captures the essentials of being able and prepared to inspire others. Effective leadership is based upon ideas (whether original or borrowed) but will not happen unless those ideas can be communicated to others in a way that engages them enough to function as the leader wants them to act. Put even more simply, the leader is the inspiration for and director of the action regardless of the person's position, they are an independent contractor and expected operate at an advanced level of agency in their ability to initiate and follow through on tasks.

We share knowledge and information because it is imperative, we operate with accuracy if we are to empower our clients, family, and the community. We require monthly supervision for our master's level therapists who are Licensed Associate Counselors – LACs and Licensed

[68] Bass, B.M., Riggio, R.R. (2006) *Transformational leadership (2nd ed)* Mahwah, NJ: Lawrence

Social Workers -LSWs, and behaviorists since our agency began. It is one of the requirements by the State of New Jersey, Children's System of Care, which grants our contract. However, we realized at the onset that there a need for increased supervision and guidance to attain accountability. In addition, many of our master's level therapists are pursuing their clinical licenses which necessitates oversight by a clinically licensed therapist while they are 3,000 hours toward their clinical licenses and taking a qualifying test. Moreover, one of the initiatives that we have recently begun on an informal basis, is collegial coaching for our therapists that work with our out-patient clients. Our therapists in this program are either Licensed Clinical Social Workers - LCSW's or Licensed Professional Counselors - LPC's and are experienced therefore they do not require ongoing supervision.

We use the terms counselor/therapist interchangeably. While all our therapists have clinical licenses, they each have their own different therapeutic styles and can operate independently without oversight. Here are some of the therapeutic styles that are used:

- Cognitive Behavioral Therapy
- Solution Focused Therapy
- Dialectical Behavioral Therapy
- Trauma Focused Therapy
- Nurtured Heart
- Substance Abuse
- Play Therapy

Regardless of the specifics of their practice, the underlying principle that we seek to instill in our therapists is to be encouragers in that the overarching ethos of New Life Counseling is to supplement positive reinforcement to whatever the client's presenting issues or

circumstances are. Therefore, becoming part of the client's behavioral treatment plan. When this issue came up in a recent session, it presented an opportunity to reinforce this message. During our discussion, therapists were called upon to be encouraged for their own professional achievements and reminded that one of their primary roles was to support and reassure their clients as well. I believe that this is another component that distinguishes New Life Counseling. We do not fit the typical profile of counseling practices because we represent the area that we practice in many ways as we live in the neighborhood, are drawn from the vicinity we serve and have used our broad-based training and experience to become experts within our own community. In these ways, we break the caste of what traditional counseling has looked like, making it more accessible and less intimidating for those who may have previously been considered marginalized and less likely to utilize therapy.

African Americans are a salient example of a minority group that continues to be underserved by the current mental health system.[69] Many African Americans feel uncomfortable with the current mental health system due to a 400-year history of being perceived and treated differently from and inferior to other Americans. According to many scholars, African Americans developed their own cultural guidelines for interacting with the larger society, which includes the mental health care institutions, to cope with their perceived social status and often daily experiences of a lack of cultural sensitivity and racial prejudice.[7071]

[69] Cooper-Patrick, L., Joseph J. Gallo, Junius J. Gonzales, Hong Thi Vu, Neil R. Powe, Christine Nelson, Daniel E. Ford, (1999) Race, Gender, and Partnership in the Patient-Physician Relationship, *JAMA.* 282(6):583-589.

[70] Ibid

[71] Dana, R. H. 2002. Mental health services for African Americans: A cultural/racial perspective. Cultural Diversity and Ethnic Minority Psychology, 8(1), 3-18. Retrieved from http://www.apa.org/pubs/journals/cdp/

Mistrust of mental health providers and a fear of cultural insensitivity from clinicians and clinical researchers have been noted as prevalent attitudes in the African American community.[7273] Fears of misdiagnosis, labeling, or of not being fully understood due to inadequate knowledge about African American life are common reasons African Americans have felt they could not trust mental health providers.[7475] For example, some issues such as racism, discrimination, community trauma, and daily financial stressors may not be openly discussed due to fears that White therapists would not understand.[76]

In addition, there is a more recent legacy of abuses of African Americans by clinical providers and researchers in the Tuskegee syphilis study.[77] This was a clinical study conducted between 1932 and 1972 in Tuskegee, Alabama, where 399 African American sharecroppers were denied treatment for syphilis. This study was conducted without informed consent or proper care, as the participants were not informed of their diagnosis. Many African Americans still remember this injustice and it rightfully adds to their mistrust of mental health providers and clinical researchers. In Medical Apartheid, 2007, Harriet Washington chronicles how African Americans

[72] Ibid

[73] Boyd-Franklin, N. (2006). *Black families in therapy: Understanding the African American experience.* Guilford Press.

[74] Ibid

[75] Clary E. G., M. Snyder, R. D. Ridge, J Copeland, A. A. Stukas, Haugen, J. and Milner, P. (1998), 'Understanding and Assessing the Motivations of Volunteers: A functional approach', *Journal of Personality and Social Psychology* 74, 1516–1530.

[76] Ibid

[77] Holden, K.B. McGregor, B.S., Blanks, S.H. & Mchaffey, C. (2015). Psychological, sociological, and environmental influences on mental health/lth help-seeking among African American men. *Journal of Men's Health*, 9(2), 63-69. Doi: 10:1016/j/jomh.2012.03.002

have historically been prey to grave robbing, unauthorized autopsies and dissections through the 20th century using the false science of eugenics to justify exploitation, shoddy medical treatment, and malpractice in the care. Overall, a lack of trust in mental health providers can make the engagement in therapy exceedingly difficult.

The second component in what is considered wrap around services to our families is the initiation of Caregiver support. We planned our first Parent/Caregiver Support session. A lot of thought and planning went into the first session with a particular emphasis on the impact of the delivery of counseling given covid-19. Still, there were numerous areas that deserved further exploration. In planning the session several issues emerged that will continue to evolve with respect to supporting the needs of caregivers and youth. The format of the session was based in my reading of action research, which begins from the premise of assessing what the level of commitment or buy in from is for the participants. Within framework three groups were identified.

- Adolescent African American Youth
- Parents and Caregivers
- Staff, including Therapists, Behavioral Assistants, Mentors and Tutors

Essentially, Action Research is a methodology that enables people to find solutions to the problems that they experience in their daily existence. The goal of action research is to provide improvement in the lives of participants. In research and Professional Life and Public Life, there are three basic components to action research process. A focus on the problem to be investigated, a systemic process of inquiry and the development of explanations that lead to increased

understanding. Research is seen as a natural extension of daily life. Action research is closely related to qualitative research which is also designed for scholars that are activists who want to see change in the lives of participants and communities. Both utilize three step formats that are analogous. Action research which compliments, and correlates qualitative research draws from Bevan's "Praxis Model", which is a way of thinking that is intense and based in theology describing the process of investigation as "action, reflection, action" based in the course of social change. Similarly, the action model uses "Look, Think, Act" in a similar process of inquiry.

The session focused specifically on the caregivers of African American youth that live in several settings that included their birth parents, grandparents, aunts, and resource home settings. The parent of a youth that is incarcerated also participated. Additionally, an issue that emerged was defining what being an African American male meant. We have several youths that are in a combination of Black and Latinx homes. In our Black and Brown communities we have many youths that identify as both or some combination of Black/ Latinx /Hispanic. Certainly, the issues that impact adolescent males of color run throughout both communities.

The set up and preparation for the session was surprisingly extensive. I have done countless trainings and meetings as consultant where it was my primary responsibility to provide the curriculum and conduct the training. Even though I worked as a consultant, it was always within the context of an agency. Their expectation was the I deliver a product which was the training that was often part of curriculum. They were also responsible for identifying and notifying the participants. However, this time I oversaw everything from the development of the agenda, identification, and recruitment of participants – and conducting the session. Additionally, I was using new technology recommended by advisor. Instead of the tradition means of AOL, I created

a Google questionnaire that would populate participant responses automatically. Although using this platform created another learning opportunity/challenge, the payoff was that it provided a wealth of information that gave me additional insight.

CHAPTER 4: RESEARCH QUESTIONS

Research Question One

What theological and biblical framework supports the need to engage marginalized African American youth?

At the heart of Christianity is the action of being able to come alongside. The early church identified The Helper, who came along to be a source of comfort and guidance to Christ followers after the crucifixion and resurrection of Jesus. The “paraclete” came along side to be our helper. “Paraclete” is a Greek word transferred into English. The translation of the word in English Versions of the Bible is "Comforter" in the Gospel, and "Advocate" in the Epistle. The word for “Paraclete” is passive in form, and etymologically signifies "called to one's side. If we believe and follow this tradition, we understand that this spirit dwells in us, allowing us to come along side others to be willing to put on the reality, trauma and pain of others. “But the Helper, the Holy Spirit, whom the Father will send in My name, He will teach you all things, and bring to your remembrance all things that I said to you.” (John 14:26) In this way The Holy Spirit comes into our presence. People who claim to be Christ followers are called to take the on burdens of others, restoring them. Hopefully, within this intentional relationship justice and restoration are possible.

For God has not given me the spirit of fear, but of love, power, and a sound mind. (2 Timothy 1:7) The concept of a sound mind has more to do with our attitude than we may realize. If our mind is sound, it is not cluttered up with the cares of this world. Its processes start with God and end with God. It recognizes the power of God and His love for us. The book of 1st Timothy is a Pastoral Epistle (letter from Paul to a church leader). The author is Paul who wrote it approximately 62 A.D, about himself and his mentee, Timothy. It was written to give encouragement and leadership guidelines to a young pastor named Timothy at the church in

Ephesus. Second Timothy 1:3–7 encourages Timothy to be brave in the face of hardships. Paul reminds Timothy that he is being prayed for, and that he comes from a family of strong faith. Paul also reassures Timothy that they are both in service of the same God, who gave them a spirit of "power, love, and self-control."

Luke 4:16-30 recounts the opening scene of Jesus' public ministry in Luke's Gospel. Here Jesus applies the words of Isaiah 61 to his own ministry: The Spirit anointed him to bring liberation to those in need. First, his mission was to proclaim good news to the poor. Throughout Jesus' ministry he emphasized God's care for the poor (Luke 6:20; 16:22) and the responsibility of others to care for them (12:33; 14:13; 18:22). Sometimes he even miraculously provides food for hungry crowds. Yet, if we look more closely at his ministry and leadership, it can also be said that he inspired others and got them to give of more of themselves by using himself as the example. His message was one of good news. Jesus saw his mission on earth as giving hope to those who believed and had faith, to strengthen and make courageous those who were week, and to liberate those who were oppressed. Mentoring and counseling have many of the same characteristics because they are based on a relationship of faith and trust.

A final theological and biblical framework that supports the need to engage marginalized African American youth "Love never fails." Billy Joel wrote the song, "I love you just the way you are." There's a great truth in that song, particularly when it comes to youth. When a child is born, the parents first prayer is that the child is normal – average. From that moment on, average will not be good enough for them. Their child must excel. They must succeed and triumph. They must be the first of their age to walk or talk or ride a tricycle. The must earn a stunning report card and amaze teachers with wit and wisdom. Boys must be star in the little league, and later quarterback or senior class president. Girls must be cheerleaders, soloist or homecoming queen. Throughout their

formative years, some parents give their children the same message day after day: “We’re counting on you to do something fantastic. Anything less is not good enough. Don’t disappoint us.” Unfortunately, exceptional children are just that – exceptions. Seldom does a five-year-old memorize the King James Bible, or play chess blindfolded, or compose symphonies. Most of the youth are not dazzlingly brilliant. They are only normal children with an oversized need to be loved and accepted. For the most part, children will be average in most areas and struggle in many other areas. To expect more is to set the stage for considerable disappointment and put unrealistic pressure on the younger generation. If we recall Billy Joel’s lyric “I love you just the way you are.” and take them to heart, our children will be blessed (Proverbs 31:28).

Research Question Two

What methodology demonstrates how mentoring and intensive counseling address the behavioral challenges of African American youth?

Action research will be the primary methodology utilizing interviews. The steps in this process are (1) Diagnosing, identifying or defining the problem (2) Action planning, considering alternative courses of action for solving a problem (3) Action taking, selecting a course of action (4) Evaluating, studying the consequences of an action (5) Specific learning, identifying general learning and making it public. All these phases center around a client-system infrastructure. (adapted from Susman & Evered 1978) The methodology will include groups and surveys. I would like to utilize quantitative methods to demonstrate clearly articulated outcomes from my agency’s impact with youth and families based on activities that demonstrate our therapeutic engagement with them. Whenever possible, we are community based and work at the homes of the youth and families we serve through intensive one on one encounters that encompass both mentoring and role modeling. I think this makes a difference because we try to be positive role models within the

context of what our families already know**.** In other words, we come from the same community. Therefore, we can relate to the challenges our youth struggle with because we have had similar struggles.

Research Question Three

What are the historical and sociological circumstances that cause African American adolescent males to make poor choices and engage in negative at-risk behavior?

"The problem of the 20th Century is the problem of the color line." W.E.B. Dubois Pathological stereotypes are ideas about people or marginalized groups that exist to justify and explain inequality. Since the time that enslaved Africans were forced into this country, they have endured brutality, mistreatment, and discrimination. Following slavery, the era of Jim Crow forced Black Americans into conditions that were far less than second class citizenship. Segregated housing, lack of job opportunities and inferior educational resources were the conditions that African Americans and Hispanics have lived under. The long history of murder and lynching of untold black men and women has now transitioned to the higher rates of incarceration of black males and their involvement in the criminal justice system. Police profiling, school suspensions, the school to prison pipeline and arrests for misdemeanors are all imbalanced and focused negatively toward black and brown communities with specific regard to males. While black youths make up 14 percent of the youth population, a 2014 study found that they make up 53 percent of minors transferred to adult court for offenses against persons, even though white and black youth make up nearly an equal percentage of youth charged with such offenses.[78]

The 2018 block buster movie, *Black Panther* gave us a glimpse of what African American

[78] Kappeler, V. E. A brief history of slavery and the origins of American policing. Retrieved from http://www.plsonline.eku.edu/insidelook/brief-history-slavery-and-origins-American-policing 2014.

society would be like if it were not colonized. Several theorists' postulate about the enduring impact of racism and its' ongoing legacy of discrimination. Joy DeGruy Leary's theory on Post Traumatic Slave Disorder draws from classic Post Traumatic Stress Disorder (PTSD) but goes further to state that the enslavement of African Americans and subsequent discrimination against them translates to undiagnosed PTSD in enslaved Africans and their descendants.[79] *The New Jim Crow: Mass Incarceration in the Age of Colorblindness*, by Michelle Alexander, examines the targeting of Black males in the prison system and likens it to slavery and Jim Crow.[80] A third book, *Caste, The Origins of Our Discontent,* by Isabel Wilkerson uses research and essays to chronical in the impact of race and caste are invariably tied together.[81] These texts offers a current response to the historical and sociological circumstances that African American youth face and often forces them into poor choices is the Black Lives Matter movement which seeks to address the ongoing problems of systemic racism and police brutality against African Americans.

[79] DeGruy, J. *Post Traumatic Slave Theory,* Uptone Press. 2005.

[80] Alexander, M. *The New Jim Crow: Mass Incarceration in the Age of Colorblindness*. New York: The New Press, 2010

[81] Wilkerson, I. *Caste, The Origins of Our Discontent.* Random House. New York. 2020

CHAPTER 5: EVALUATION PROCESS

The evaluation process that will be most effective in determining the success of my Demonstration Project will be a narrative that focuses how African American youth display anger, impulsivity and decision making drawn from case studies. Behavioral and character development will be assessed through three different methods.

METHOD I – Parent Conferencing/Consultations

In focusing on the behavioral development in these areas of their own growth and improvements from the beginning of the program to the completion of the program, parents will give feedback on the positive and negative aspects of the program. The parent's ability to define and discern whether their adolescent benefited from the program by evidence in their behavior, their interactions with family members and with their peers. Parents will be required to do a critical assessment of their adolescent from their perspective, observation, questions and concerns where they see a positive or negative transformation in their adolescent after participating in the program. Parents will give feedback on the different situations at home, reports from school, congregation, and community concerning the behavior and actions of their adolescent during and at the end of the program. Parents will also have the opportunity to rate their level of involvement in their adolescent's counseling and express their views on the effectiveness of this program on their lives. Ultimately, their behavior and involvement can and will directly impact the performances, achievements, and transformation of the adolescent's overall success.

The session was also conducted via Zoom. Attendance included 11 caregivers and three therapists, totaling 14 participants.

Summary of the support group meeting

The meeting began with a brief history of our agency followed by participant introductions. A distinction was made between different types of meetings and that this as a support group was also psycho-educational, but not a training workshop where information was being presented. The meeting had two major goals which were:

1. To gather information from participants so that the agency could be more supportive and assistive.
2. To become a platform where caregivers could support one another, seeing that they were not alone in their struggles and experiences.

This discussion was presented within the context of providing services within the context of covid-19. A key point to participants was that the meeting was a safe place where confidentiality was respected, with the understanding that all participants shared similar issues with their youths. Participants were transparent for the most part and actively engaged in discussion as questions were asked. They sought out information and gave feedback about the impact that intensive counseling had on their youth. This was the case even when the youth's presenting problems continued to persist. We talked about the extent of counseling in terms of time frames and additional resources that were possible such as behavioral assistance, tutoring and mentoring. An explanation of each was provided and how it could supplement the main counseling component. For example, some youth benefit from the additional support of a behaviorist who supplements the therapist by providing activities that reinforce behavioral goals. If a youth is working on anger management, the therapist may focus on identifying what makes the youth angry and why. The behaviorist would work with the youth on what triggers angry feelings and strategies to mitigate those feelings.

Additionally, we talked about mentoring for youth with a focus on role modeling and parent coaching that is aimed teaching parents' specific skills around issues such as disciplinary practices, effective communication and setting boundaries. These were among the topics that were particularly relevant due to the restrictions and confinement that covid-19 has placed on youth and families. Parents shared their concerns more out of an opportunity to vent their frustrations than to find remedies that are not readily available.

METHOD II – Adolescent Conferencing/Consultations

I used the goals and strategies of my Demonstration Project to talk with the adolescents to determine if the program provided age-appropriate language, directions, activities, and vocabulary. The youth provided feedback on their various learning styles and activities. Feedback from the adolescents were identified and decerned related to their strengths and weaknesses that were either more fully developed or discarded during the program. The adolescents will be required to exhibit their awareness of emotional needs and cultural differences in written and oral dialogue. The adolescents will design bulletin boards and visual aids showing the importance of diversity in their lives, community, and the world.

METHOD III – Survey's and Analysis

"When two or three are gathered together in My name, I am there in the midst of them." (Matthew 18:20)

Utilizing my research data, visual examination, and data collected over the course of the program, my site team and I devised a series of questionnaires and surveys based on the research on Black male adolescent behavioral and mental health outcomes. The heart of my work with our agency and the development of its philosophy has been the insistence that we make a connection with youth and families we work with - impressing upon them that we understand, connect and join

with them. That is why it was critical to develop the two following surveys. The first survey was created specifically for our staff. Even though I promote this philosophy, I wanted to know if our staff shared the same ethos and how they expressed this sentiment in their own words. A second survey was created out the need to also hear from the organizations that send referrals to us.

Agency Staff Survey Methodology and Time Frame

As I began this process, I started to think about what a significant opportunity it would be for me to be able to connect with each staff member individually and hear their unique perspective. To accomplish this goal, I devised a three-week plan. However, the actual process went well beyond these timeframes in length and intensity of effort. I found that organizing people was a complex and time consuming, but immensely valuable in the learning process. It gave me many insights into the nature of people and what motivates them. This knowledge from the first questionnaire equipped me for the fortitude that would be necessary moving forward with the subsequent surveys.

Week One – development of the survey
Week Two – Send out survey and follow up via phone and text.
Week Three – Discussion of survey and gathering of feedback, during monthly staff meeting.

*It should be noted that the actual response from results extends for several subsequent weeks.

Therapist Questions

1. What is your ethnicity? 31 responses

    96. 8 % of responders identified as African American. 3.7% of responders identified as white.

2. What is your gender? 30 responses

83.3%3 of the responders were female. 16.7% were males.

3. How important is the therapist's ethnicity/gender in counseling African American male adolescents? 31 responses

   93.5% felt that it is very important. 6.5% said that it was somewhat important. No one said they were unsure or said that race/ethnicity was not important.

4. How important is the youth's decision to participate in counseling? 31 responses

   83.9% said it was very important. 16.1% said it was somewhat important. No one responded that they were unsure or that the youth's decision was not important.

5. How does the youth's decision impact your counseling strategy? 29 responses

   (Answers attached)

6. How important is it for African American Youth to have African American counselors? 31 responses

   87.1% responded that it was very important. 12.9% said that it was somewhat important. No said that they were unsure or that it was not important.

7. Why do you feel that this is important? 29 responses

Community Provider Survey

In the midst gathering information from staff, I began to think of a fourth stakeholder that is outside of agency (and beyond my scope of direct influence) but a critical partner in the process. Initially, I thought about including our referring agencies and care management organizations (CMO's) as part of our agency. However, they are not and reaching out to them would require a much greater effort. Yet, reaching out to them would also yield a much wider and more comprehensive picture of this issue. Namely, how the system at large values the importance of African American male counselors and our work and efficacy with Black male adolescents and

their families.

Initially, the time frame coincided with seeking surveys from our staff. I planned to devote a week to follow up once I sent out the questionnaire. However, this turned in to two weeks of follow up which would occur during the course of my regular interactions with providers. In other words, the survey became part of my agenda in most conversations. Like my strategy with our staff, I developed a list of individuals that I have working relationships with and began to build from there until I accumulated approximately 23 possible responders. I received 20 responses back. This included agency directors, care managers and other individuals that make referrals from the following establishments.

- Care Management Organizations (CMO's)
- Counseling Practices
- Medical/Health Care facilities
- Community Partners

1. What is your ethnicity? 20 responses.

   60% of responders identified as African American. 25% identified as White. 10% identified as Latinx. 5% identified as other.

2. What is your gender? 20 responses

   75% of responders were female. 25% identified as male. No one said that they preferred not to say.

3. How important is the therapist race/ethnicity and gender in selecting a counselor, behavioral assistant and/or mentor for an African American male adolescent? 20 responses

   90% said that it was very important. 10% said that it was somewhat important. No one was unsure or said that it was not important.

4. How important is the youth's decision to participate in counseling? 20 responses

90% said that the youth's decision to participate is very important. 10% said that it is somewhat important. No one was unsure or felt that it was not important.

5. How important is it to have an African American male counselor? 20 responses

75% said that it was very important, 15% said that it somewhat important. 10% were unsure. No one said that race was not important. Why do you feel that this is important?

As I continued to research, the process began to take on a life of its own. I reached out to each person individually and spoke with them about my research, what I hope to accomplish and how New Life Counseling is the vehicle to achieve this goal. It should also be stressed that surveys were designed to be anonymous, so I was relying on an honor system of sorts, for cooperation. I felt anonymity was essential because I wanted transparency and honesty in participant responses. I had to be considerate of each person's time, agenda and schedule of responsibilities. During my follow up, I practiced patience and persistence without being annoying in getting stakeholders to respond. There were certain key people that I wanted to reply, as well as have a diverse representation of ethnicity and gender. Even though I could not identify their specific answers; I followed up diligently to get confirmations, receiving subsequent feedback during those communications and discussions.

The scope was broader when I looked at the Community Provider survey in that our demographics expanded as we get referrals from persons of multiple ethnicities. This was a very significant confirmation for me because it is the goal we sought to achieve. I wanted to be able to demonstrate the need for our agency from the wider community. Someone who was at the top of my list was an administrator at one of the largest CMOs in Essex County, NJ. Her feedback was

key because she wrote the initial letter on our behalf stating that New Life Counseling fulfilled a critical unmet need in the behavioral health community because I was a licensed African American male therapist and that the public needed us. This response and the insights of others made the time, patience, and diligence worth the effort.

Summary of Findings

When I began this research, I wanted to focus on two primary areas. My first concern was being able to amass enough responses to address the big picture of African American male counselors. (1) Parents/Caregivers, (2) Adolescents, (3) Agency (4) Community Partners; that work with our agency. I did not have a specific goal for the number of individuals involved in my research but knew that I wanted to be deliberate and concerted in my efforts to engage the whole community that we serve. After a lot of persistent and strenuous follow up that resulted in many fruitful and enlightening discussions, I accumulated 11 responses from the Parent/Caregiver Surveys; 11 responses from the Youth Surveys represented a collaboration that included three youth on my caseload and eight youths from the caseload of another of our male therapists who works primarily with male adolescents; 31 responses and 20 responses Agency/Community Surveys; totaling 73 replies from the four groups of stakeholders.

As I managed and coordinated this process, I learned how much it takes to get people to answer surveys when the request is not part of their immediate responsibilities – and they are not accountable to you. It was also a balancing act, because I did not want my passion for this project to impact my professionalism in the way I usually conducted the business of our agency. While this study and the results were important to me, and presumably those who I identified; the response rate I got was approximately 80%. This gave me a whole new respect for the study that I started and determination to see it through because of the importance of this subject. I was also extremely

grateful and appreciative from the response of so many.

Dominique Hammonds, assistant professor and testing coordinator at Appalachian State University says, Black clients report to counseling with the same common presenting concerns that other clients have. But in addition, they often seek counseling because of issues of "voice and value."[82] They have experiences that either minimize their voice or communicate — overtly or covertly — that their ideas, opinions, and problems do not matter or don't matter as much as those of others, she explains. Feeling undervalued, dismissed, and unheard can lead to anxiety, depression, and other mental health issues. Research also indicates that Black Americans are 20% more likely to report serious psychological distress than are White Americans, the negative perceptions of mental illness and treatment among Black Americans. Stigma, a lack of trust in mental health care and a mislabeling of Black people's presenting concerns make this group more apprehensive to seek counseling. Financial constraints and a lack of access to culturally responsive mental health care are additional barriers. Despite these challenges, New Life Counseling and Mental Health has established itself as an agency that continues to grow in its service to youth and families.

As an African American Licensed Clinical Social Worker for over 30 years, I know that children of different races and ethnicities do not experience trauma equally. Nationally, 61 percent of Black children have suffered at least one adverse experience, compared with 40 percent of White children.[83] This impacts their behavior, emotional development and decision making. This demonstration project incorporated a therapeutic approach called Post Traumatic Growth and

[82] Hammonds, D. Black Mental Health Matters, *Counseling Today.* 2020

[83] Burke Harris, Nadine, A Hidden Crisis: Findings on Adverse Childhood Experiences in California Center for Youth Wellness, 2014

mentorship to address the effects of trauma amongst Black adolescent males.

The survey used for the participants were like those of the Caregiver Survey, they were geared to an adolescent's perspective, maturational and developmental level. Even then, it was found that we had to clarify questions for them and ask in several ways so that each youth got a fuller clear understanding. Eleven adolescents participated in the survey. I was also able to get information from our therapist regarding several youth who could not take the survey due to lack of comprehension.

Participant Survey Questions

1. Was it your decision to participate in counseling?

   54.5% of adolescents said yes, that they came into counseling willingly. Another 27.3% were unsure. 18.2% did not want counseling Would you participate in counseling if it were up to you? 18.2% were unsure. 54.5% said that they would participate if the decision was their own. 27.3% said that they would end counseling if they could. 18.2% said they were unsure.

2. Do you think counseling is helpful? On a scale from 1 -5, (not helpful – very helpful).

   Please choose a number represent your choice.

   63.6% said that counseling was helpful. 9.1% thought it was mostly helpful. Another 9.1% were unsure. 18.2% felt it was sometimes helpful. 0% thought it was not helpful.

3. What do you like most about counseling?

   - The following are responses about what youth liked about counseling.
   - Discussing different topics and general conversation
   - Learned to deal with my behavior

- Nothing
- When we talked
- Not being judged when he discussed his feelings
- Talking
- 1 on 1 aspects
- Unsure1
- The in-person connection

What would you change?

- Attitude and behavior
- COVID-19 restrictions
- Not walking
- Nothing
- Times and scheduling
- Unsure
- Times and scheduling

4. How important is it to have interactions with African American males? On a scale from 1-5. (not important - very important). Please choose a number to represent your choices.

    45.5% said that it was very important. 27.3% said that it was not important. 18.2% said that it was most important. 9.1% said that a sometimes important. 0% said they were unsure.

Summary of Results

Ultimately, the reason for this survey was to gain insights about how our youth feel about counseling with the goal of tailoring better services to meet their expressed needs. In some cases, the lack of responsiveness that came from our youth was surprising – from my perspective. Then, I

had to think about them and honor their honesty. This made me even more committed to supporting them and my commitment to the importance of placement of African American males that are professionals in their lives. Realizing that they may not fully comprehend, realize or accept the importance of positive role models. My therapist used the term “emotionally unaware” meaning that they do not have the vocabulary to connect words with what they are thinking or feeling. We talked about using multiple choice scales with explanations tied to specific key, feeling words I also had to take culture into account in that many of our youth live in households and/or communities where they do not see African American males engaged in a lot of positive behavior.

I am reminded of a parent who told me that the people in her apartment complex thought I was her son’s father. They criticized me to her because “I drove a nice car, but only came around once a week and did not even bring groceries.” My initial reaction was that her neighbors needed to mind their business. But then I realized that even though they perceived me as being part of the family - in reality- I was an outsider and not privy, influenced, or vulnerable to the impressions of strangers. My perception of being in community partnership was worlds apart from living within the family’s communal bubble. This prompted me to do an informal survey with another parent who shared a similar sentiment. Her way of addressing the issue with neighbors was to explain that I was the youth’s counselor. A reflection question that I could have asked was whether each young person had their father or a significant male role model in their life.

CHAPTER 6: MINISTERIAL COMPETENCIES

1. Leader
2. Counselor
3. Technology and Social Media

Leader

A leader is one who creates an environment in which the gifts of the Spirit may flourish. She or he is effective in empowering others to realize their own calling or gifts and facilitates opportunities in which others can flourish. Such a person is characterized by a willingness to listen and respond, the capacity to take the initiative when appropriate, the ability to delegate responsibility to capable people, and the sensitivity to share resources. Please give one or more examples of this competency as you have observed it: As a leader is it critical to always think of the bigger picture and not to react emotionally.

While we should never forget and always have an awareness that we are human with feelings. In as much, we must always create space in our responses to create space for facts, information and the prospective of others.

What qualifying word would you assign? Competent - having the necessary ability, knowledge, or skill to do something successfully.

Strategy One: Willingness to learn from others understanding that each participant brings a dynamic and unique set of skills and abilities.

- Conference with 3 other agency leaders to get feedback and share information.
- Read three articles on leadership.
- Attend professional development as it relates to leadership

Strategy Two: Willingness and ability to take initiative when appropriate. Knowing when to lead and when to delegate is a critical component of leadership.

- Attend one training on leadership development.
- A review of staff responsibilities
- Use learning to enhance program development.

Strategy Three: Willingness to show appreciation for a job well done (including her or his own). Acknowledgement of time, effort and accomplishment are key components of leadership. A central theme of transformational leadership is that it should raise the level of motivation and morality in both the leader and follower.

- Schedule staff appreciation event.
- Utilize monthly supervision and staff meetings as an opportunity to provide feedback, support, and encouragement.
- Use participant feedback to encourage involvement.

Evaluation: Request a written evaluation from program participants. The evaluation will demonstrate that many participants saw an improvement in guidance and leadership. 80% of participants will be able to say that saw improvement in guidance and leadership.

- A survey will be given to staff for feedback.
- Three articles on Leadership will be reviewed.
- A staff meeting will cover the topic of leadership.

Counselor

Counseling is concerned with the work of healing, sustaining, guiding, and reconciling. In performing these tasks, the counselor has the privilege of walking with others on their inner

journey toward wholeness. Within the context of faith, the effectiveness of any form of counseling is always contingent on the pastor, rabbi, or other religious leader. Whatever model or theory one chooses to guide one's practice, it is imperative that the counselor be capable of establishing creative relationships that can help others become more whole. To the degree that the counselor is open, genuine, free, self-accepting and growing, she or he will foster these qualities in others.

There are two counseling themes that come to mind in this area that enhance communication. The first is to meet the person where they are, not where you want them to be. The second is to use Socratic reasoning, being mindful to listen and question more than to speak. Even when tempted to provide explanations that seem to make sense to the therapist.

What qualifying word would you assign?

Empathetic - the ability to see the other as having capabilities and strengths without applying generic labels.

Strategy One: Demonstrate skill in relating and communicating with clients.

- Administer a survey to each youth and caretaker.
- Provide a resource guide for parents and caregivers.
- Utilize learning and participant commentary in counseling practice.

Strategy Two: Demonstrate knowledge regarding human psychological development utilizing developmental theory.

- Engage in study of relevant literature.
- Attend one training in human development
- Schedule individual meetings with each caretaker to discuss their understanding of human development

- Utilizing the Adverse Childhood Experiences (ACE) scale.

Strategy Three: Demonstrate the ability to relate with youth through their inner journey.

- Schedule 3 individual meetings with each youth
- As youth would want out of a counseling/mentoring experience.
- Develop pre and post assessments

Evaluation of Goal**:** Request written evaluation and feedback from participant related to the impact of counseling/mentoring. The evaluation will demonstrate that many participants saw an improvement in guidance and leadership. Be able to help others to sustain, to endure, and to work through difficulties or crises to a point of reconciliation or restoration. Provide each youth will receive helpline information for additional resources. 80% of participants will say that they benefited from counseling.

Technology and Social Media

The utilization of Mass media a big part of our practice model. However, because of covid-19, our agency had to initially transfer from in-person services to 100% on-line. No one could have anticipated the dramatic and swift changes that would occur. While we are now using a hybrid model, combing in-person with virtual therapy, on-line treatment strategies are here to stay. While our learning curve has been steep, there was no choice but to embrace our new method of service delivery. This means that we are learning how to function in an arena where there were no established guidelines. We also have an agency website that has greatly expanded our presence in the mental health community. 90% of our clients' report that they have visited this source prior to contacting us and we have seen a dramatic increase of referrals resulting from the Corona virus and the mental health issues that this caused. We can use mobile apps that include Zoom, Webex, and WhatsApp for on-line counselling.

What qualifying word would you assign?

Emerging - developing skills with guided, skilled assistance.

Strategy One: Identify which computer applications are essential and required to perform at a level of proficiency to see clients, communicate and gather information.

- Expand and develop current website
- Attend training in technology and social media

Strategy Two: Be able to seek out resources and technical assistance when needed by identifying individuals that can serve as specialized and advanced knowledge in technology.

- Consult website of 3 other agencies that are doing similar work.
- Identify 3 people that can serve as ongoing technical supports.

Strategy Three: Continue to gain additional skills related to technology. To advantage of opportunities to learn new technologies and practice once these skills are learned.

- Provide monthly posts on agency website and social media.
- Maintain an active listing of all social media outlets that are connected to the agency.

Evaluation of Goal: Demonstrate the ability to understand and utilize technology that is required professional and academic and settings. Establish ongoing communication with technology supports and resources. Conduct monthly update of agency website that incorporates relevant information on counseling/mentoring. Demonstrate an 50% capacity to demonstrate improved utilization of technology.

Key Words

Leader

The following verses reflect the values and qualities of leadership that I seek to achieve and emulate. I have learned that leadership and faith go hand in hand. Having faith to try one's best believing that God will see you through to the outcome and that it be good.

- "If you falter in a time of trouble, how small is your strength!" (Proverbs 24:10)
- "Before I formed you in the womb, I knew you, before you were born, I set you apart; I appointed you as a prophet to the nations." (Jeremiah 1:5)
- "Not so with you. Instead, whoever wants to become great among you must be your servant." (Matthew 20:26)

No one likes adversity or difficulty, hardship, or danger. We would all choose to avoid it if we could. It is easy for anyone to resent it, but it truly measures our strength and faith in God, for adversity best proves integrity and perseverance. Without adversity, how would one show faith or strength? God wants us to see that our relationship is personal and that our strength is within the community of those who are believers having faith that God knew us in our mother's womb and his thoughts toward us are precious. Being the amazing creator that God is, it did not stop there. In the Old Testament, God touches Jeremiah's mouth with his own hand, putting his divine word into Jeremiah's mouth. He makes Jeremiah someone who can speak truth to power, and can prophesy both destruction to the nations, and their eventual re-building. Jesus extends this message by saying to his disciples that true greatness won't come by flaunting authority as the Gentile leaders do. Instead, they will become great by serving each other.

Ideally, leaders have the task of casting visions for those within their scope of influence. If they are transformative, they will inspire and motivate those who follow their direction. And leadership

must also be pragmatic. Peter Northouse in Leadership, Theory and Practice points out that leadership must also include the following qualities[84]:

1. Operating from logic and not emotion.
2. Understanding the important relationships in life and what the qualities of those relationships are. Effectively handling stress.
3. Taking responsibility.
4. Understanding what can be controlled vs. what cannot be controlled. Given these characteristics, effective leadership is always a balancing act and combination of the visionary and practical.

Justice

Learn to do right; seek justice. Defend the oppressed. Take up the cause of the fatherless; plead the case of the widow. (Isaiah 1:17, NIV) "Learn to do good; seek justice, correct oppression; bring justice to the fatherless, and please the widow's cause," (Isaiah 1:17). "He has told you, O man, what is good; and what does the Lord require of you but to do justice, and to love kindness, and to walk humbly with your God?" (Micah 6:8)

The Spirit of the Lord is upon me, because he has anointed me to bring good news to the poor. He has sent me to proclaim release to the captives and recovery of sight to the blind, to let the oppressed go free. (Luke 4:18)

Peace is not the absence of violence, but the presence of justice that causes one to fight for what is right, fair and equitable.

- "No justice, no peace. Know justice, know peace."

[84] Northouse, Peter, 2012, Leadership, Theory and Practice 6th Edition, Sage publications.

- From God's throne comes righteousness and justice. (Psalm 89:14)
- Do you know what I want? I want justice - oceans of it. I want fairness - rivers of it. That's what I want. That's all I want. (Amos 5:24)

Responding to God's call for justice means listening to the marginalized people.

Essentially, the term justice means to restore, correct, or make things right. "Justice is, first and foremost, theologically a relational term, meaning living in right relationship with God, one another, and the natural creation. From a scriptural point of view, justice means loving our neighbor as we love ourselves and is rooted in the character and nature of God. As God is just and loving, so we are called to do justice and live-in love."

"No justice, no peace" is a political slogan which is a play on words that originated in protest against violence directed at African Americans by white Americans, though the precise meaning of this phrase is contested. The slogan has been used as early as 1986, following the murder of Michael Griffith at the hands of mob of white youths. This slogan is also often attributed to Rev. Al Sharpton, founder of the National Action Network and signifies the call to action in the fight for civil rights. Biblically, most psalms do the same thing. They involve the praise of God for his power and beneficence, for his creation of the world, and for his past acts of deliverance from Israel. They envision a world in which everyone and everything will praise God, and God in turn will hear their prayers and respond. "But let justice roll down as waters, and righteousness as a mighty stream." The prophet Amos was saying—as most of the Hebrew prophets were saying at the time—that what God wants is justice and much as we do. As it was true then, it remains so today.

Freedom

Discipline is the essence of freedom. In the second Book of Genesis, it is said that God gave Adam and Eve all they needed, but only asked that they not eat from the tree of Good and Evil - the Tree of Knowledge. While this tree may have represented access to vast, godly wisdom, it was also beyond their ability to understand. So, it was a test of their maturity and restraint. They did not understand that discipline is the key to freedom and faith that we will grow our wisdom and humanity if we keep our eye on God.

Here are some Biblical verses that reflect freedom.

- Now the Lord is the Spirit, and where the Spirit of the Lord is, there is freedom. (2 Corinthians 3:17)
- I will walk about in freedom, for I have sought out your precepts. (Psalm 119:45)
- Moreover, when grievously oppressed, even then they walk at ease, for they commit the doubtful issue of events to God in such a manner, that, having him for their guide, they have no doubt they will come out boldly from the depths of distress.
  (2 Corinthians 4:8.)

Sociologist Orlando Patterson argues that Western society only began to value freedom only once it had experienced tyranny, oppression, and slavery.[85] Freedom is a precious, but precarious commodity. It is something that people are willing to give their lives to defend. According to Patterson "if you want to know who the people were that first valued freedom, then look at those who were enslaved."[86]

[85] Patterson, Orlando. Slavery and Social Death, A Comparative Study, Harvard University Press, 2018

[86] Ibid

The words Leader, Justice and Freedom are inter-related because to truly have each of them, the other two are necessary as well. They are like the different parts of the body that respectively have their own function but operate together to make us whole human beings. True leaders seek justice for those they serve and who follow them. They speak truth to power and stand up for the communities they represent. In doing so, their goal is to impower, achieve justice and equity in opportunities for those who are disadvantaged and marginalized. Yet, as importantly, freedom means the acknowledgement that the moral and unrestricted will to make one's own choices bears responsibility that goes along with those decisions.

Recommendations

The NJ Children's System of Care which is by far our largest contract and source of referrals operates out of a philosophy of "Family Choice and Family Voice". This is consistent with the ethos that guides our practice. Our methodology has been to seek to empower families through our example of advocacy, professionalism and cultural relevancy in order assist them. We are keeping faith in the sentiments that Maya Angelou once expressed when she said, "People will forget what you said, people will forget what you did, but (in the end) people will never forget the way you made them feel." Proverbs 3: 5-7, says, "Trust in the LORD with all thine heart; and lean not unto thine own understanding. In all thy ways acknowledge him, and he shall direct thy paths." If we have faith, ultimately, we have vision believing that the things that we see – will come to pass. The purpose of this demonstration project has been to show the importance of African American male counselors and their relationship to Black male youth. We acknowledge and are grateful to all the stake holders and the contributions they make in support of African American male adolescents. We understand the risks and challenges they face from many segments of society that have both a current and deeply historical basis. Yet, we continue to believe that we are guided

by our faith in the work we do and communities we serve.

This counter-story is a narrative that seeks to bring together the intersection of where faith meets, activism and advocacy. Our words are limited by our vocabulary, but our thought life is an arena of infinite capacity in which God can give us life changing concepts. Jesus taught us that we have the mind of God and that the heart should be the source of our words. "For out of the abundance of the heart the mouth speaks" (Mathew 12:34). In my mind's imagination, I can think of one final counter-story: it's a metaphorical reference from history, but still current and relevant today. Our agency receives word about two male adolescents - distressed, tired and hungry that need our assistance. Their only transgression – that they are in bondage and one dared to read to the other, who dared to listen. Yet, we've been given the key/skills to set them free. Although its long afterhours, we reach out to them as a new day begins. We know that those who are blessed must be a blessing to others. A bridge over troubled waters. Our hope is that each youth, each family and the community we serve can see our vision – and that we can see theirs as well, joining together believing that the best is yet to come – teaching new skills, fresh confidence and the vision of a new improved life.

A Final Note

These closing comments can be viewed as a doxology because they are words of praise. The opportunity to enter New York Theological Seminary and pursue a doctorate in ministry after 30 plus years as a social worker is the epitome of lifelong learning. Having a chance to attend class at the esteemed and beloved Riverside Church in Harlem is something I would have never imagined. Some would say that my demonstration project - the creation of an intensive counseling and mentoring program for African American youth by African American professionals is a tried-and-true initiative. Yet, I am reminded of one of our professors who would continuously remind us that

our goal was to create “new knowledge”.

The effort put into the design of my demonstration project and subsequent writing of this dissertation has pushed me to research areas that were previously a remote aspiration. This scholarly exercise is something that I will continue to learn and draw from in years to come. My hope is to be able to share this new knowledge in my field of practice, within my community and beyond.

The old testament story of Jacob in Genesis 28 provides an illustration of what this experience has taught me. ” Jacob left Beersheba and went toward Haran. And he came to a certain place and stayed there that night, because the sun had set. Taking one of the stones of the place, he put it under his head and lay down in that place to sleep. And he dreamed, and behold, there was a ladder set up on the earth, and the top of it reached to heaven. And behold, the angels of God were ascending and descending on it! And behold, the LORD stood above it and said, "I am the LORD, the God of Abraham your father and the God of Isaac. The land on which you lie I will give to you and to your offspring. Your offspring shall be like the dust of the earth, and you shall spread abroad to the west and to the east and to the north and to the south, and in you and your offspring shall all the families of the earth be blessed. Behold, I am with you and will keep you wherever you go and will bring you back to this land. For I will not leave you until I have done what I have promised you." Then Jacob awoke from his sleep and said, "Surely the LORD is in this place, and I did not know it."

Harlem’s poet Laurette, Langston Hughes, put it this way in the wisdom of Mother to Son. The poem describes the difficulties that black people face in a racist society, alluding to the many obstacles and dangers that adversity throws their way. It also demonstrates that if we have strong determination and courage then we can win any race in this world no matter how rough our way.

“Well, son, I'll tell you:

Life for me ain't been no crystal stair.

It's had tacks in it,

And splinters,

And boards torn up,

And places with no carpet on the floor --

Bare.

But all the time

I'se been a-climbin' on,

And reachin' landin's,

And turnin' corners,

And sometimes goin' in the dark

Where there ain't been no light.

So boy, don't you turn back.

Don't you set down on the steps

'Cause you finds it's kinder hard.

Don't you fall now --

For I'se still goin', honey,

I'se still climbin',

And life for me ain't been no crystal stair.”

By Langston Hughes

APPENDICES

As a school social worker this poster was on the wall of my office for many years. Now that I have retired, I have taken it with me, and it now hangs in the entrance of our counseling practice. The image is a source of inspiration to me. It is a representation of each Black male adolescent that I work with and reminder to me to see some part of them in myself.

Appendix 1: TIMELINE

Date	Task/Activity	Tools/Necessary to complete task	Person Responsible
6/30/20	Submit Draft Proposal		Me
6/30/20	Update Site Team		Me
6/30/20 – 3/30/21	Writing/Research Time		Me
9/20	Development of Team		Me
10/20	Meet with Participants/Provide Overview of Demonstration Project		
1/21	Pre-Tests	Pre-Tests/Survey	Me
2/21	Direct Engagement with Youth	Various Activities	Me
2/21	Post- Tests	Post-Tests/Survey	Me

Appendix 2: BUDGET

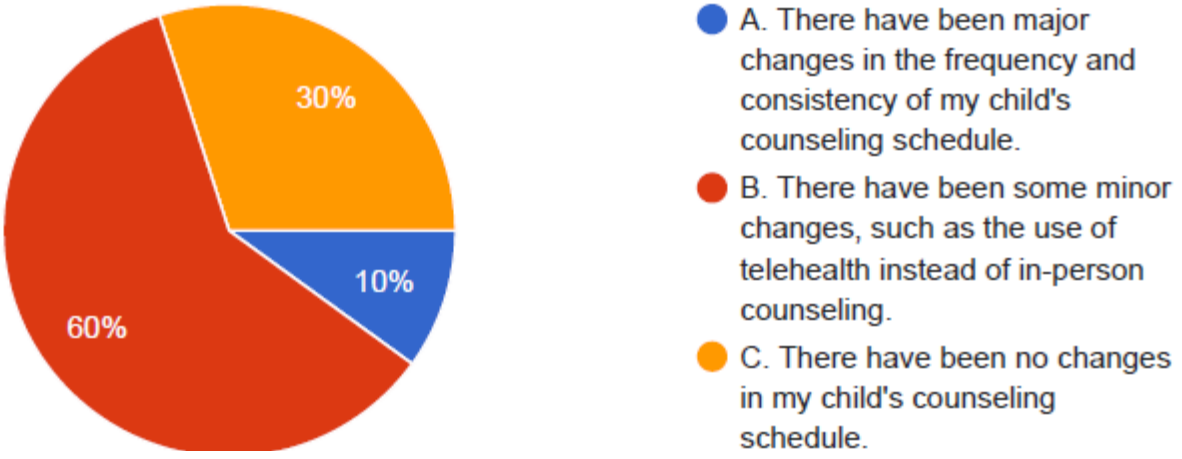
Date	Task/Activity	Person Responsible	Budgetary Consideration/ Cost	Source of Funding
6/30/20	Submit Draft Proposal	Me	$0.00	Me
6/30/20	Update Site Team	Me	$0.00	Me
6/30/20	Writing/Research Time	Me	$750.00	Me/ Editor
10/20	Meet with Participants/Overview of Demonstration Project	Me	$0.00	
10/20	Pre-Tests	Me	$0.00	Me/ Therapists
10/20	Direct Engagement with Youth	Me	$0.00	Me/ Therapists
10/20	Zoom Webinars	Me	$200.00	Me
1/21	Post- Tests	Me	$0.00	Me

Appendix 3: SURVEYS AND RESPONSES

Caregiver Survey Responses

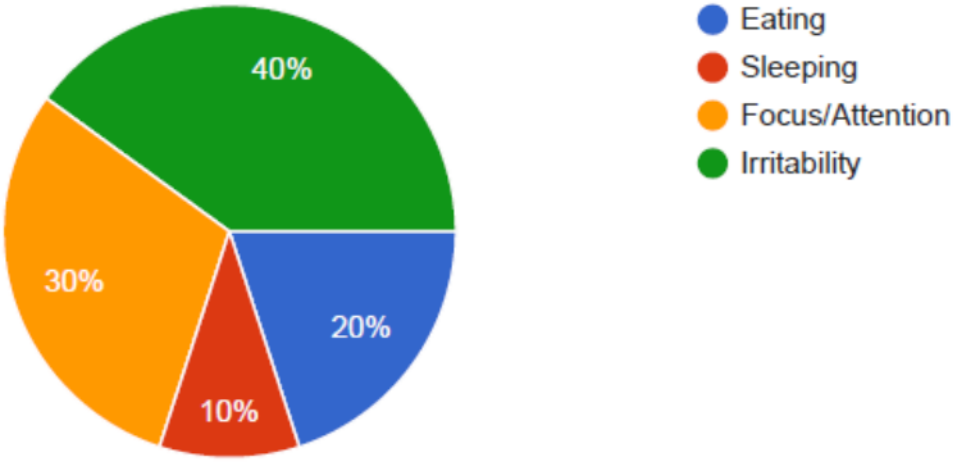
1. How has covid-19 impacted the provision of Intensive Counseling - IIC and Mentoring to your child? (Choose one)

10 responses


30%
10%
60%
A. There have been major changes in the frequency and consistency of my child's counseling schedule.
B. There have been some minor changes, such as the use of telehealth instead of in-person counseling.
C. There have been no changes in my child's counseling schedule.

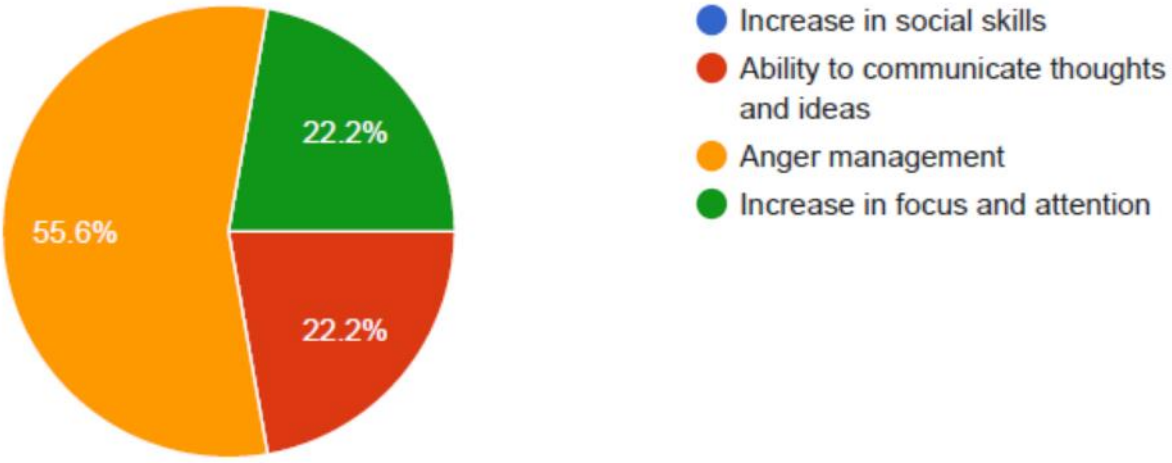
2. How has your child's behavior been impacted by covid-19? Check all that apply.

10 responses



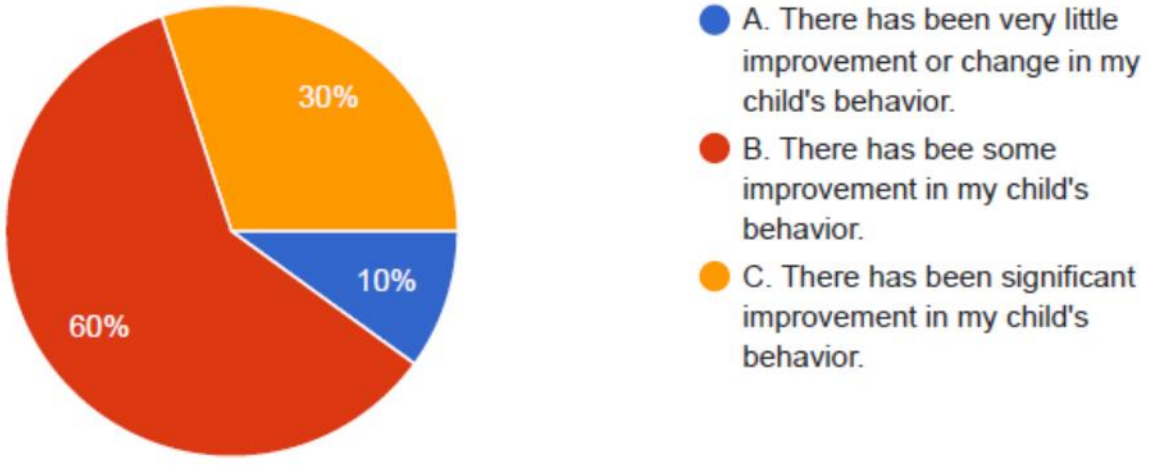
3. What has been the biggest impact of Intensive Counseling - and Mentoring? Please choose one.

9 responses



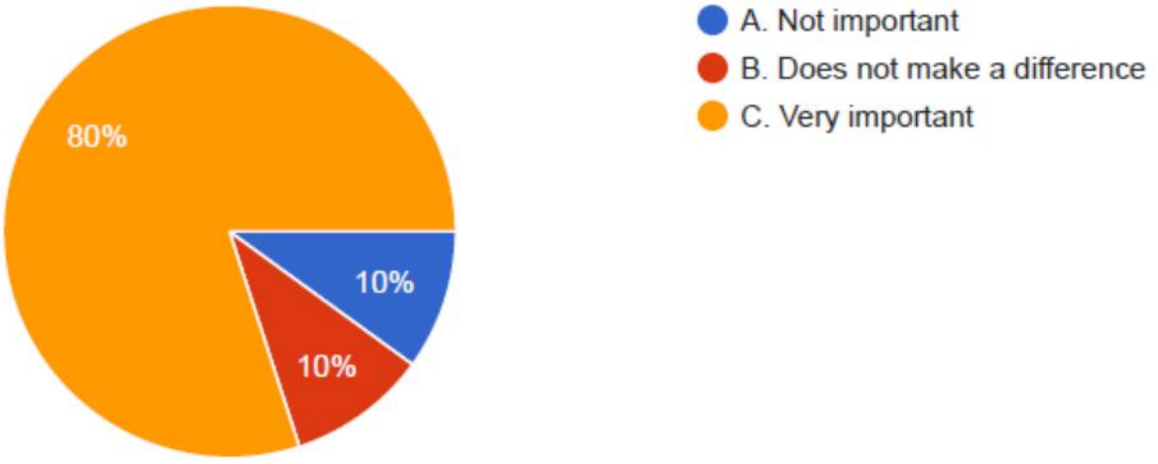
4. Has Intensive Counseling - IIC and Mentoring improved your child's overall behavior? (Choose one)

10 responses


30%
10%
60%
A. There has been very little improvement or change in my child's behavior.
B. There has bee some improvement in my child's behavior.
C. There has been significant improvement in my child's behavior.

5. How important is it to you to have an African American male therapist - IIC and Mentor for your child?

10 responses



Parent/Caregiver Responses

Please feel free to write any comments, questions or additional concerns that you may have. Thank you for responding to this survey!

6 responses

My son has made wonderful progress. I'm thankful to the recommendation that was made by my son's mentor to New Life Counseling.

I hope that counseling will help my nephew to improve his focus and self esteem.

Xavier feels frustrated

Mr. Webb's services has been a very strong impact for Christian. His communication and understanding has been a very positive help with Christian. It is very pleasing to have someone so professional and so caring to work with my son. My son is very comfortable speaking with him and I has learned to communicate especially eye contact thanks to Mr. Webb.

The following are the questions presented and their responses. We discussed their concerns and responses at our support group meeting.

1. How has covid-19 impacted the provision of Intensive Counseling – IIC and Mentoring to your child.

Covid-19 has had an impact of the provision of counseling, 60% of parents said that there have been some minor changes. 30% said that there have been no changes and 10% said that there have been major changes.

2. How has your child's behavior been impacted by covid-19?

Covid-19 has had the biggest impact on their child's irritability. 40% of parents said they saw a change in this area. 30% of parents saw a change in focus and attention, 20% saw a change in their adolescent's eating habits. 10% of parents saw a change in their youth's sleeping patterns.

3. What has been the biggest impact of Intensive Counseling – Mentoring?

Parents saw changes in three major areas; 55% said that anger management had been impacted, there was a split of 22.2% between focus and attention and ability to communicate thoughts and ideas.

4. Has Intensive Counseling – IIC and Mentoring improved your child's overall behavior?

60% of parents saw some improvement in their child's behavior, 30% saw a significant improvement. 10% of parent have not seen improvement yet.

5. How important is it you to have an African American male therapist -IIC and Mentor for your child?

The following are additional comments, questions and concerns that were expressed by parents and caregivers.

1. My son has made wonderful progress. I'm thankful to the recommendation that was made by my son's mentor to New Life Counseling.
2. I hope that counseling will help my nephew to improve his focus and self-esteem.
3. Xavier feels frustrated.
4. Mr. Webb's services have been a very strong impact for Christian. His communication and understanding have been a very positive help with Christian. It is very pleasing to have someone so professional and so caring to work with my son. My son is very comfortable speaking with him, and I have learned to communicate especially eye contact thanks to Mr. Webb.

5. My grandson is not doing too good during the pandemic he has gotten into drugs he says he is only smoking marijuana, but I don't know if that's all. He has uncontrollable angry issues he breaks stuff in my apartment he has broken three door a window and the mirror in the bathroom I have had to pay 700 dollars out of pocket to the maintenance crew to keep it from the management office. He has ADHD he's not on medicine but I think I'm going to ask his doctor if he needs to go back on medicine he has problem with the medicine health problems that's why I took him off but I think he may need something to help him he cusses at me he is very disrespectful he come and go when he want to I try to stop him it don't help I talk to him when he will listen nothing does any good I don't know how to help him and his parents don't help me with him
6. Not sure how to really answer these questions. My son has been through a lot of changes. Some things have slightly improved while other behavior have come to surface.
7. Therapy would be more beneficial in person maybe a few more times a week. My son seems to need constant check-ins to keep on top of him.

Youth Engagement

Questionnaire Survey

* Required

Your answer

Your answer

1. Was it your decision to participate in counseling?

- ◯ Yes
- ◯ No
- ◯ Unsure

2. Would you participate in counseling if it were up to you?

- ◯ Yes
- ◯ No
- ◯ Unsure

3. Do you think counseling is helpful? On a scale from 1 - 5, please choose a number to represent your choice.

- ◯ 1. Not helpful
- ◯ 2. Sometimes helpful
- ◯ 3. Unsure
- ◯ 4. Mostly helpful
- ◯ 5. Very helpful

4. What do you like most about counseling?

Your answer

5. What would you change?

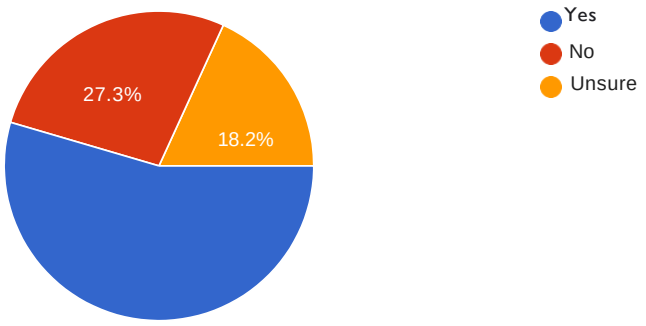
Your answer

6. How important is it to you to have interactions with African American males? On a scale from 1 - 5, please choose a number to represent your choice.

- ◯ 1. Not important
- ◯ 2. Sometimes Important
- ◯ 3. Unsure
- ◯ 4. Mostly important
- ◯ 5. Very important

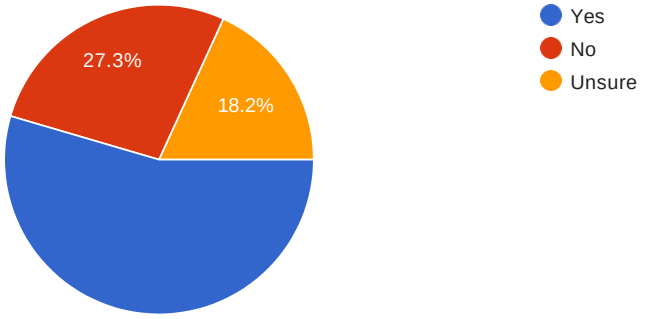
Was it your decision to participate in counseling?

11 responses



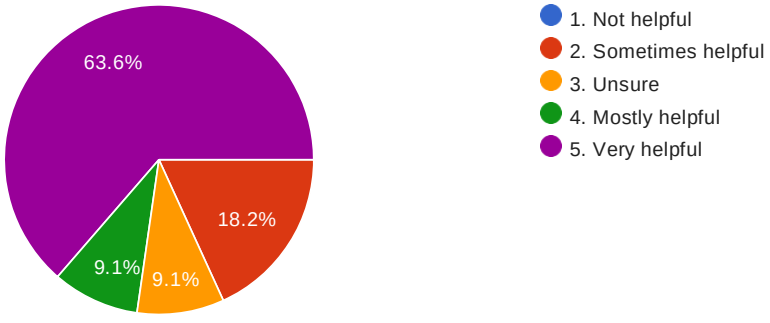
1. Would you participate in counseling if it were up to you?

11 responses



2. Do you think counseling is helpful? On a scale from 1 - 5, please choose a number to represent your choice.

11 responses



4. What do you like most about counseling?

11 responses

Discussing different topics and general conversation

Learned to deal with my behavior

Nothing

When we talked

Not being judged when he discusses his feelings

Talking

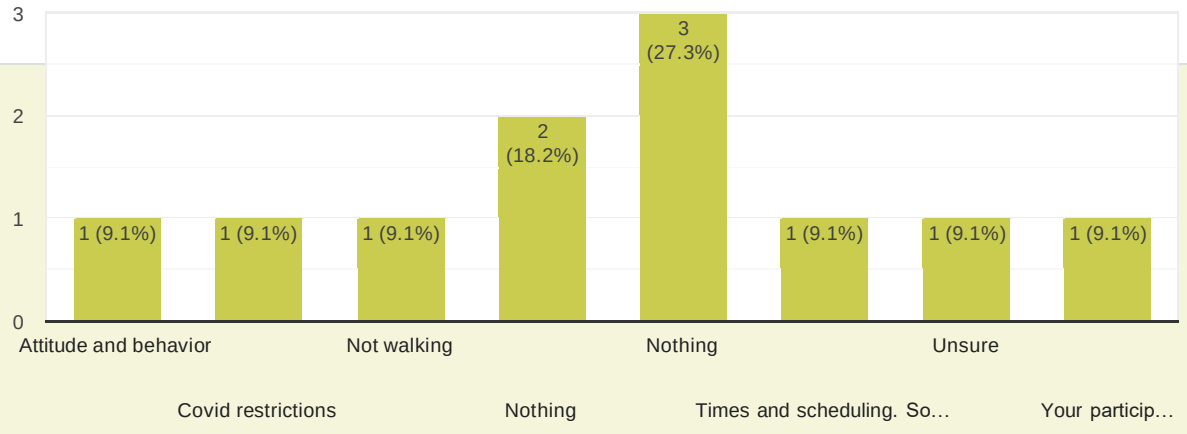
1 on 1 aspects

Unsure the in-person

connection

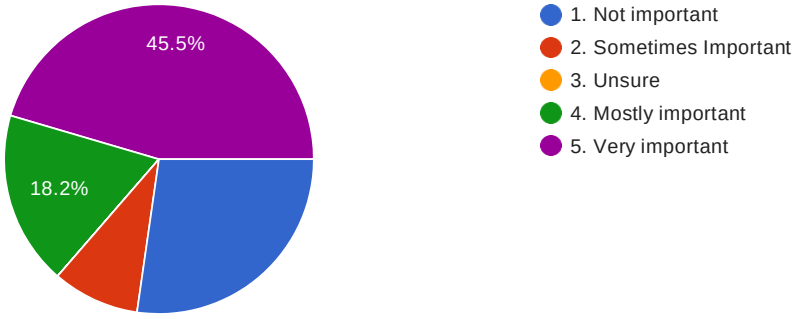
5. What would you change?

11 responses



6. How important is it to you to have interactions with African American males? On a scale from 1 - 5, please choose a number to represent your choice.

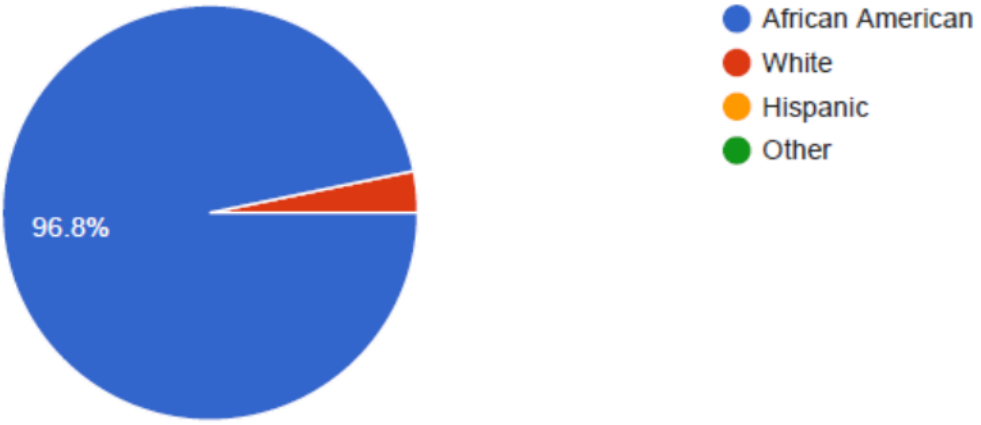
11 responses



Care Provider Survey Responses

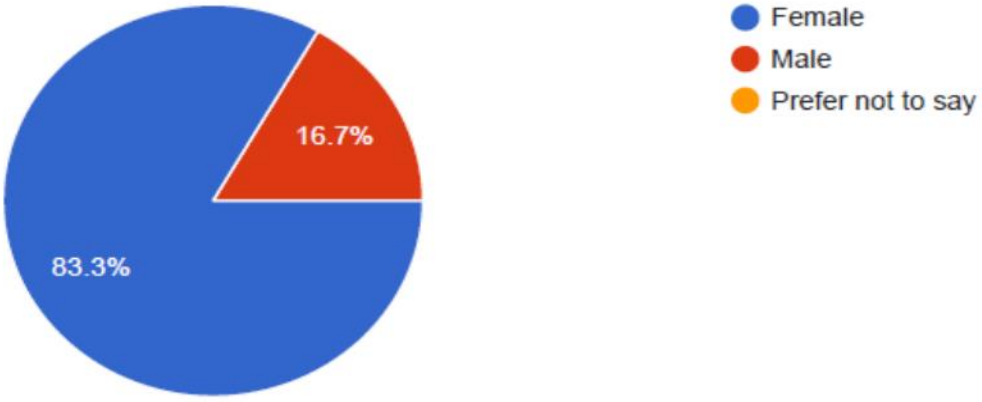
1. What is your ethnicity?

31 responses



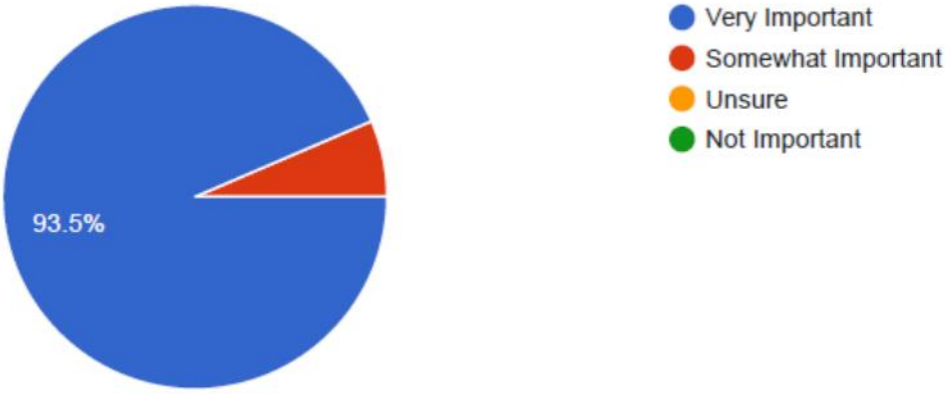
2. What is your gender?

30 responses



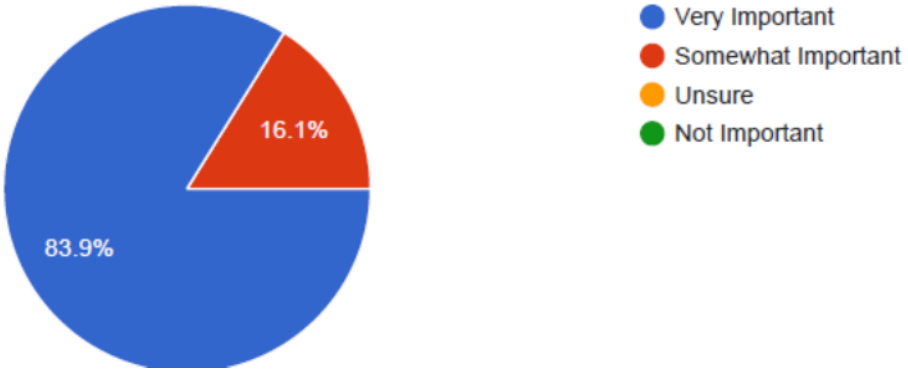
3. How important is the therapist's ethnicity/gender in counseling African American male adolescents?

31 responses



4. How important is the youth's decision to participate in counseling?

31 responses



5. How does the youth's decision impact your counseling strategy? Please explain.

1. More rapport building is usually needed when a youth isn't as open to counseling.

2. The youth may not initially be all in... and that's ok. If they agree to show up, that speaks volumes. Meet them where they are and then implement strategies to move them along. Baby steps count.

3. It’s 60/40 with the caregiver.

4. N/A

5. The youth decision on participating in counseling plays a key role.

6. The Youth's decision impacts your strategy because if they are opposed to counseling, you must break down the wall of fear and/or mistrust and build one of trust and respect first before any counseling can take place. If they are willing to participate, then you can start using strategies based on the information that you gathered from the strengths and needs assessment.

7. I would need to adjust my strategy and come up with alternatives to establish trust and successful therapeutic relationship.

8. Their willingness determines how I approach therapy and what theoretical orientation I will be using with them.

9. The youth's decision impact the counseling strategy because the main goal is to get the youth to open up and talk more.

10. It determines how I approach the initial sessions to build rapport.

11. Knowing the youth is involved will allow the counselor to guide the youth to be a part of their treatment and allow the counselor to move straight into the process of assisting with change.

12. The youth's decisions can provide an overview of their social/emotional functioning and provide the opportunity to determine the most effective techniques and strategies to meet their needs. It also allows for the opportunity to meet them where they are at.

13. It is extremely important that youth feel some sense of agency within the treatment

modality/ intervention because there are so many things in children's lives that is out of their control. Their therapy experience should be something that they have a say in.

14. It can provide an insight to your effects as a therapist/counselor.

15. It is hard sometimes to get an African American youth to participate in counseling, so it is important to approach the counseling strategy with careful and friendly conversation. The conversation must not be forceful and allow the individual to open up freely.

16. Understanding how the youth views himself and the impact counseling gives you insight on how to help him.

The youth decision impacts my methodology by determining how much time to spend on rapport building activities and conversation before attacking the presenting problem.

17. If the youth is non-compliant with counseling services than it’s challenging to assess the needs accurately.

18. The youth's decision impacts my counseling strategy is very important.

19. Youth's decision impacts significantly for my counseling strategy because through those decisions I can meet the youth where he is at and gauge the level of involvement and willingness to make changes for the success of the youth.

20. Their decision the way in which I engage and build rapport at the beginning of services. I make sure to acknowledge whether services were requested or imposed and how that will be included in their treatment.

21. It helps build rapport; it also helps with the importance of healing emotions.

22. If the youth does not have any interest in counseling, then they will do little work,

put in little effort and make maybe minimal progress.

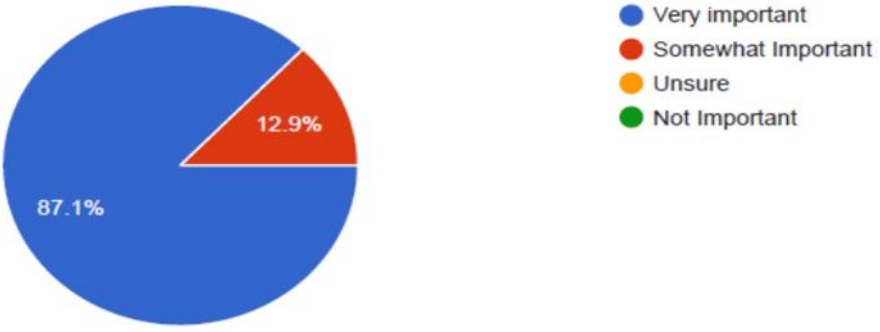
23. It impacts the counseling strategy regarding whether the youth would be receptive to a particular strategy or needing to reconsider an alternative strategy to address a treatment. The reason for the youth's decision has an impact towards considerations of changing a counseling strategy.

24. I will strive to give my all but at the end of the day the clinician can only do but so much. Of the Youth chooses and can fully engage I believe it will be truly beneficial for the youth ... the inverse is also true.

25. The youth provides the long/short term goals, identifies the challenges, the triggers and the narrative for the plan. No strategy can be developed without the youth's choice to participate. The youth is the core developer in all planning. The data provided by a willing participant creates a path to a well-developed treatment plan.

6. How important is it for African American Youth to have African American counselors?

31 responses



1. The element of being able to relate and truly understand a person's experience can completely affect/ change the dynamic and outcome of counseling.

2. The connectivity piece is valuable. Showing that you can look like " you" and understand (and demonstrate) counseling is valued.

3. For too long the AA community has not dealt with mental health and it is crucial that we not only deal with it by utilizing therapy but that we value the benefits as well.

4. They need someone who they can relate to and who can relate to them.

5. An African American counselor will be able to relate better to some of the "unspoken" issues that the youth might have. Body language is important, and an African American counselor will be able to read these "signs" better than a counselor from a different ethnicity.

6. It is important that youth seeking counseling be able to identify a d be comfortable with the therapist.

7. This is significant because the Youth can identify with someone who looks like them. It also can play a large part of trust.

8. They need to be able to identify with someone who looks like them, understand the culture firsthand, etc.

9. I believe people from the same or similar cultures have an increased capacity to understand and comprehend how certain experiences affect individuals of the same culture, background, ethnicity and so forth.

10. It is important for a youth to have an African American counselor because the youth will be able to relate better with the counselor.

11. They will not be patronized.

12. As we have seen society, is still very racist towards blacks. Having the universal understanding as a black therapist will allow the counselor to help with foster the youth's identity and coping skills in today's society.

13. Youth in particular, have expressed a strong desire to meet with and connect to

counselors they feel can relate to them on various levels. The desire to connect with someone that looks like them and can personally relate to some of their experiences. These issues may include, but is not limited to the hurt, harm, and detriment in dealing with racism and discrimination, issues poverty, socioeconomic stressors, the African American family dynamic/traditions and values, etc. It's not enough to know or understand the African American experience, but to have lived it and survived.

14. This is significant because there are so many negative stereotypes of the Black community that young black people need to be able to see that there are positive and successful Black professionals that they can identify with.

15. Young African Americans need as much identification as they can. They need to know that anything is possible.

16. It is very significant for an African American youth to have an African American counselor as the youth will see this person as someone that understands their culture. This allows the youth to feel comfortable about opening up about their situation.

17. Having someone identify with you...both race and culture can make it more comfortable for the client to open up.

18. The cultural component is paramount. The youth need to feel you're an individual who will understand them and relate to their lives. Furthermore, youth are looking for some to emulate and look up to (a mentorship). The culture component makes this process easier and more possible.

19. Youth connections are made through relevancy and the feeling that the other therapist understands them. Especially since they have a hard time communicating.

20. African American youth need someone to relate to from a cultural perspective.

21. African American youth frequently come with resistance and feelings of being misunderstood; therefore, the importance of youth being able to culturally relate to the therapist can be significant for success.

22. I feel that having AA counselors makes it more likely that the youth will be comfortable and confident in their treatment. There would be less needed to try and translate the basics of AA culture to the counselor. Leaving more opportunity to process their youth culture and the challenges that have brought them to counseling.

23. In most cases working with someone who looks like you, has similar experiences can help kids and families feel more connected to therapist which helps with rapport which helps with child/family increased progress.

24. In urban communities it has been helpful for African American youth to have positive African American role models. There are many youths within the urban community living within a fragmented family system and having someone who may be of a similar community can have a positive factor for youth.

25. There have been many studies that show how much relatability matters in many fields. In the end it comes down to connection/therapeutic alliance.

26. Having utilized therapist myself, one of the major determining factors during my selection process was identifying with my therapist. All humans have an origin, and we base our values from our core (parents). We ask: Do you look like me? Are you, my gender? Did you encounter similar things? Have we shared similar experiences or felt familiar biases? What do you know about being BLACK in America? Did you have a father in your home? These questions are very imperative to our youth, and they determine if the vessel will “OPEN” or remain “CLOSED” for what may deemed an

eternity of darkness in the world of mental health. Our youth want to break generational “curses” or challenges. This can only be done once a common denominator can be established. Race and ethnicity are crucial in the fulfillment of mental health services for African American Youth.

Community Provider Survey

Thank you for your participation in this survey!

1. What is your ethnicity?

African American
White
Latinx
Other

2. What is your gender?

Female
Male
Prefer not to say
Other:

3. How important is the therapist's race/ethnicity and gender in selecting a counselor, behavioral assistant and/or mentor for an African American male adolescent?

Very important
Somewhat important
Unsure
Not important

4. How important is the youth's decision to participate in counseling.

Very important
Somewhat important
Unsure
Not important

A. Please explain.

Your answer

5. How important is it to have an African American male counselor?

Very important
Somewhat important
Unsure
Not important

6. Why do you feel that this is significant? Please explain.

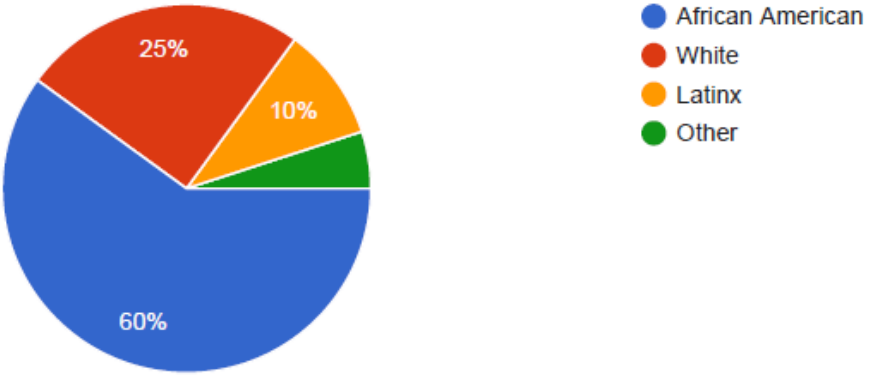
Your answer

Submit

Community Provider Survey Responses

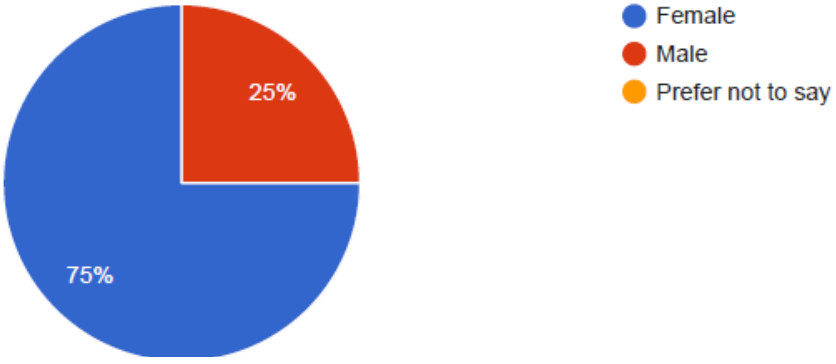
1. What is your ethnicity?

20 responses



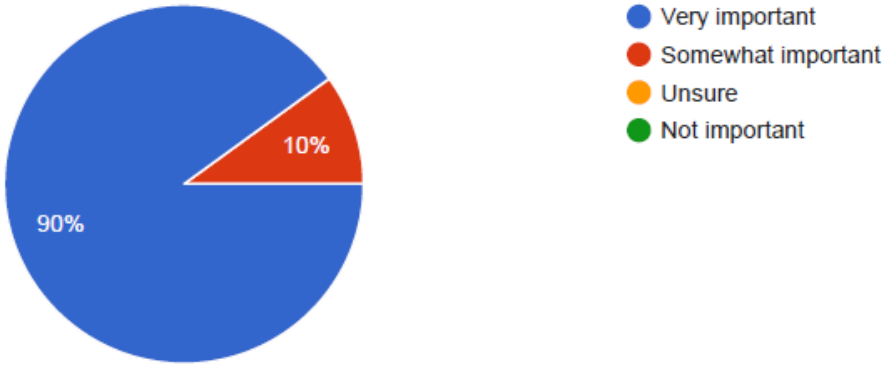
2. What is your gender?

20 responses



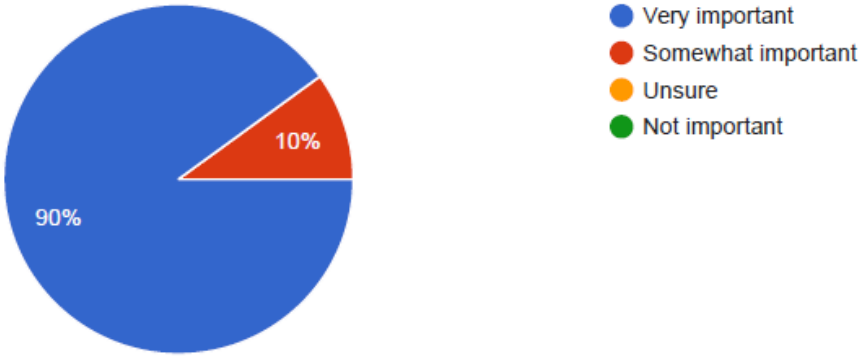
3. How important important is the therapist's race/ethnicity and gender in selecting a counselor, behavioral assistant and/or mentor for an African American male adolescent?

20 responses



4. How important is the youth's decision to participate in counseling.

20 responses



Question 4A

1. The youth's engagement is contingent on how willing they are to participate. Yes, therapists are prepared, especially when working with parents referring their children, to have to put in extra ice breaker work, but it came make all the difference when race isn't an additional barrier to get past.

2. Young African American men need male role models to help encourage them and provide

direction in life.

3. If a youth is unwilling to partake in counseling, then the counseling would be useless to the youth. The youth may hear insights that resonate with them to be used later, but change will not fully happen until a youth is ready to participate in the process.

4. Ethnicity, gender play an important role when therapy services are in place. The outcome of the services is more efficient when the client can relate to a therapist who share the same norms and values.

5. Willingness can help the process.

6. It impacts the youth's mindset and motivation towards counseling and treatment progress.

7. The youth needs to be willing and receptive to counseling and make effort to make changes for the process to be successful.

8. I feel it's important because the youth must be willing to participate. If the youth is not willing to participate counseling cannot be effective.

9. If the youth have an interest and or willingness to participate in the treatment process the likelihood for positive outcome increases exponentially.

10. Sometimes as a youth, you are conflicted in your ability to make decisions, because of trust issues. You may need someone whom you trust to help you see the advantage of counseling and your emotions. There are trust issues, so they don't always agree to counseling. They may need someone to help them see the advantages. If it is a good fit the young will see how it is to their advantage

11. The youth’s investment in treatment directly correlates with how well they will do at accomplishing their goals.

12. A person must want/know their need for help.

13. The youth must be an active participant in his treatment. Thus, the youth's input is vital in any decision being made regarding treatment.

14. There is therapeutic value in youth participating in counseling sessions to share their feelings and experiences.

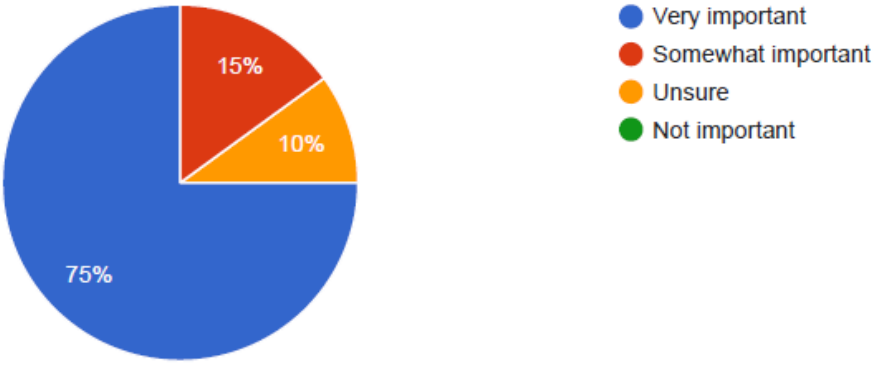
15. Response to question 3: race, ethnicity, gender are important factors; also, key is the therapist's ability to quickly establish rapport and trust with youth. Question 4: Youth's readiness/stages of change and decision to participate in counseling is of paramount importance.

16. In order to fully benefit from the process, an individual must see the value in it.

17. Family choice is very important!

5. How important is it to have an African American male counselor?

20 responses



Question 6

1. As touched on above, our initial judgements are formed in the initial meeting, rather quickly. Particularly when working with at risk youth, the sooner you can start building

rapport the better. I've had families ask for a provider of the same ethnicity because they're worried, they will offend someone of a different race or are looking for the comfort of shared experience.

In many cases the father of African American males is missing from their lives. This void deeply impacts them. Therefore, an African American male counselor can make a significant difference in a young African American boy's life.

2. Diversity is significant. Representation always matters. An individual should have an option to choose between their preferences of a counselor's gender and background. Realistically, an African American male counselor can reach a certain population of youth/clients that are not able to be reached by another demographic of counselors. Because therapy from a therapist that you resemble will promote engagement, trust and understanding of the issues that are being shared. That will make you believe you are being heard; Progress would be noted.

3. Provides perspective that is often overlooked.

4. For some youth it may be easier to build rapport due to shared backgrounds.

5. From my experience, African American adolescents have better rapport with African American counselors and have better success rates in counseling.

6. I think African American male youth need to have someone that looks like them and can relate to them. Representation is huge and I feel this will make African American male youth more incline to participate.

7. The majority of youth we serve in our county are A.A. males, however there aren't enough clinicians with whom they can identify.

Appendix 4: GLOSSARY

- **Amygdala:** A component of the limbic system that is involved in the expression and perception of emotion. National Institutes of Health, National Institute on Drug Abuse. (2010). The brain: Understanding neurology. Retrieved from http://science. education.nih.gov/supplements/nih2/addiction/other/glossary/glossary.htmll
- **Axon**: The fiber-like extension of a neuron through which the cell carries information to target cells1 **Basal ganglia**: Deeply placed masses of gray matter within each cerebral hemisphere that assist in voluntary motor functioning2 2 National Institutes of Health, National Library of Medicine, MedlinePlus (http://www.nlm.nih.gov/medlineplus/mplusdictionary.html)
- **Brainstem:** The structure at the base of the brain through which the forebrain sends information to, and receives information from, the spinal cord and peripheral nerves1
- **Cerebellum**: A portion of the brain that helps regulate posture, balance, and coordination1
- **Cerebral cortex**: The intricately folded surface layer of gray matter of the brain that functions chiefly in coordination of sensory and motor information. It is divided into four lobes: frontal, parietal, temporal, and occipital2
- **Corpus callosum**: The largest white matter structure in the brain. It connects the left and right cerebral hemispheres and facilitates communication for emotion and higher cognitive abilities3 3 Hart, H., & Rubia, K. (2012). Neuroimaging of child abuse: A critical review. Frontiers in Human Neuroscience, 6. Retrieved from http://www. ncbi.nlm.nih.gov/pmc/articles/PMC3307045/

- **Cortisol**: A glucocorticoid produced by the adrenal cortex that mediates various metabolic processes, has anti-inflammatory and immunosuppressive properties, and whose levels in the blood may become elevated in response to physical or psychological stress2
- **Epigenetics**: The study of how environmental factors like diet, stress, and post-natal care can change gene expression (when genes turn on or off) without altering DNA sequence4 4 National Institutes of Health, National Institute of Mental Health. (n.d.). Brain basics. Retrieved from http://www.nimh.nih.gov/health/ educational-resources/brain-basics/brain-basics.shtml#Glossary
- **Executive functioning**: A group of skills that help people focus on multiple streams of information at the same time and revise plans as necessary. National Scientific Council on the Developing Child. (2011). Building the brain's "air traffic control" system: How early experiences shape the development of executive function (Working Paper 11). Retrieved from http://developingchild.harvard.edu/index.php/resources/ reports_and_working_papers/working_papers/wp11/
- **Frontal lobe:** One of the four divisions of each cerebral hemisphere. The frontal lobe is important for controlling movement, thinking, and judgment1
- **Gray matter:** Neural tissue, especially of the brain and spinal cord, which contains cell bodies as well as some nerve fibers, has a brownish gray color, and forms most of the cortex and nuclei of the brain, the columns of the spinal cord, and the bodies of ganglia2
- **Hippocampus:** A component of the limbic system that is involved in learning and memory1 ƒ Hypothalamic-pituitary-adrenocortical (HPA) system: A hormonal system

that produces cortisol in the outer shell of the adrenal gland to help regulate the body's stress response system6 6 National Scientific Council on the Developing Child. (2014). Excessive stress disrupts the architecture of the developing brain (Working Paper 3). Retrieved from http://developingchild.harvard.edu/resources/reports_and_working_papers/working_papers/wp3/

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